\*

Subrat Satapathy

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**SOFTWARE SPECIFICATION FOR WORK HORIZON**

1. WORK OF WORK HORIZON:WORKHORIZON is an intermediary between the Producers and Consumers. Simply, we just sell the products and services of our Partners in almost all the region inside India. We are expert in analyzing and identifying the taste and preferences of the consumers, Thanks to our Sales Research Team and the Advance Technology we use. We are delighted to call us the professionals to Place and Promote any product or Service of our partners inside India. This is made possible by our strong and active marketing team having a reach to every corner of Odisha. We Follow a basic three-step process to achieve our dreams 1. Attract 2. Serve and 3. Retain. We attract our customers through promotions. Is Promotion easy? No! Who told you? Have you seen our Massive Network? We have a dedicated Network who promote our services. They do promote our services among the people and help us to create a small spot in their Heart. We are in a target to cover almost all the region through our Customer Care Centers, which shall provide Qualitative and Quantitative Services to our Clients and Customers.
   1. **CURRENT FIELD OF WORK:**
      1. **TECH SOLUTION:** WORK HORIZON empowered with the best tech partners to provide impressive technology and provides a large number of technical solutions to our clients ranging from small-scale industries to high-end enterprises. It even targets the technical needs of each and every individuals, groups, team and different communities.

* **Services under Tech Solutions:**
  + - 1. Web and Application Development.
      2. Enterprise Software Development
      3. Data Analytics
      4. Cloud Computing
      5. Technical Support System
      6. Technical Consultancy
      7. Database Administration
      8. Business Intelligence Developer
      9. Network Development
      10. IT Security
      11. Digital Payment Solutions- SPICE MONEY
      12. Digital Marketing
    1. **HEALTH CARE SOLUTIONS:** WORK HORIZON provides qualitatively and quantitates Health Care Services to the people of India irrespective of their earnings, knowledge level or even their place of Stay. It aims to open 2500 Consultancy Centers across Odisha within 6 months to achieve its goal. We maintain a large database of numerous Hospitals, Medicine Stores, Patho Labs, Diagnostic centers, Clinics etc. and can suggest the best cure center for the disease. A person in need of the Health Services can consult us through our Care Executives at the Care Centers or can call us directly to avail the Health Care Services.
* **Services Under Health Care Solutions:**
  + - 1. Healthcare Consultation.
      2. Appointment to Doctors, Hospitals
      3. Ambulance
      4. Air Ambulance
      5. Health Card
      6. Health Insurance
      7. Offline Purchase of Medicine
      8. Outpatient Care
      9. Baby Care and Baby Products
    1. **AGRO SOLUTIONS:** WORKHORIZON aims to provide the farms and the Farmers by providing them with sophisticated technology for farming and by providing fertilizers, seeds, soils etc. which are essenWORKHORIZONl for better farming. The Agro experts of WORKHORIZON analyses the farming conditions and provides expert advice on farming. It not only helps the farmers to grow their seeds but also take care of their earnings by facilitating them a proper channel to sell their products.

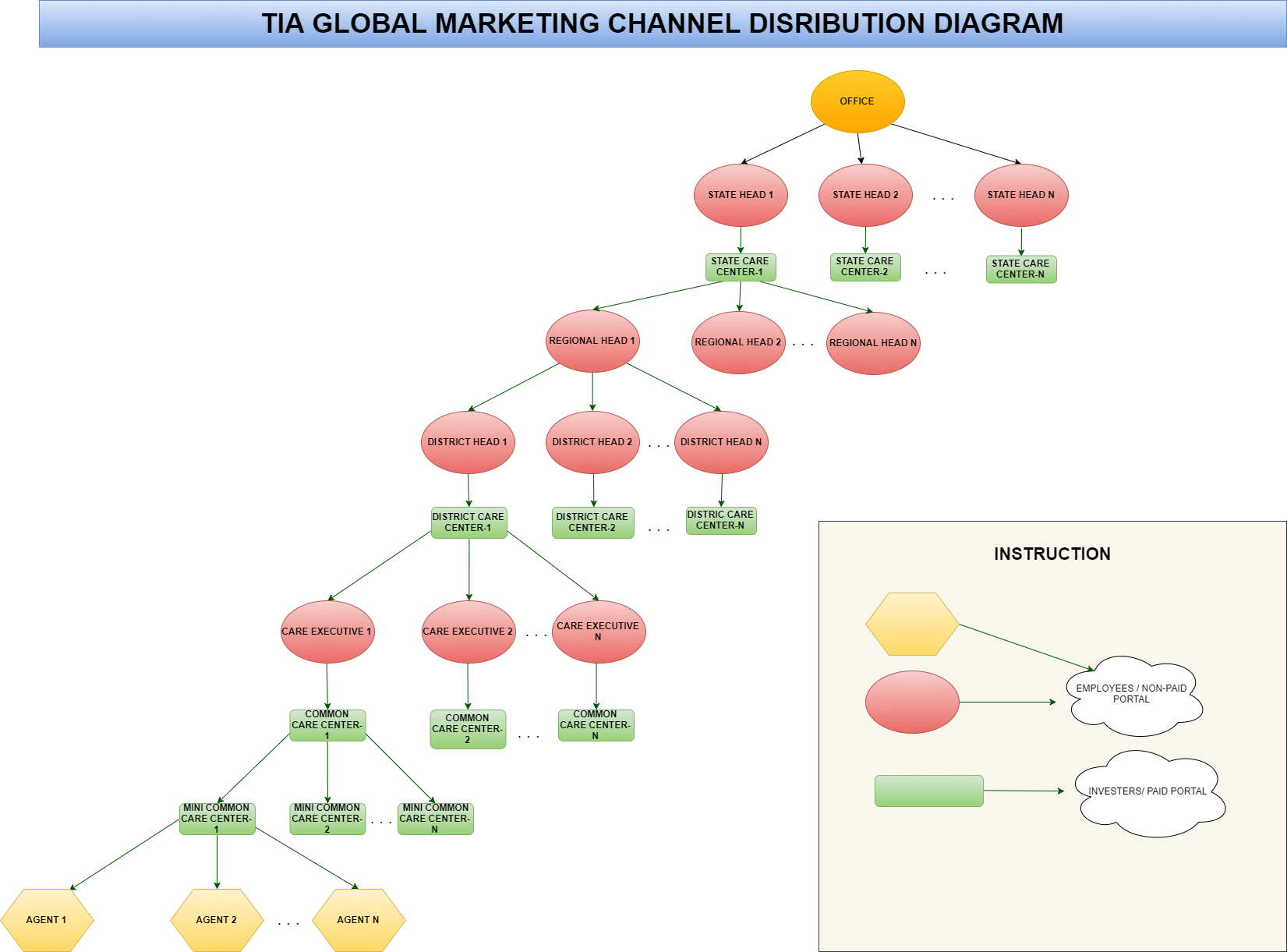
WORKHORIZON shall here collect the farming products from the farmers directly, process it and sell it in the Market. WORKHORIZON shall also work as a service partner to the FMCG companies and sell place products in the market directly through its marketing Channel. This shall be the Primary Focus of WORK HORIZON right now.

* + 1. **CONSULTANCY SOLUTIONS:** WORKHORIZON Provides a tailor-made consultancy solution in the field of Education, Law, Human Resource, Finance, and Marketing. The Consultation is flown through the care centers located in different parts of the country. WORKHORIZON aims to help all the start-up firms with Stat up fund along with the specified consultation to make the business of our client successful and evergreen.
  1. **FUTURE FIELD OF WORK:**
* Career Counseling
* Tourism
* Marketing Solution for FMCG Products , Logistic and Transportation
* Courier & Cargo etc.

# THE STRUCTURE OF THE WORK HORIZON:

**A**. **Marketing Structure:**

Primarily, the marketing structure of WORK HORIZON is important. The Diagram of the marketing structure of WORK HORIZON is showing below for the kind perusal.



**Figure:1**

As Explained in this figure the entire Marketing Channel is a 10 Level Tree Structure, in which each and every Parent has “N” Number of Chanel where N=1,2,3……. n(Integer).

**Level 1:** The First Level is the Head Office of WORK HORIZON under which the entire marketing function works.

**Level 2:** Level two is the Level of State Head. For different states in India, there will be one State Heads each. They are the employees of WORK HORIZON and are under direct Pay Roll of the Company. They do not need to purchase the Portal of WORK HORIZON. Once a Person will be appointed as the State Head a Free Portal of WORK HORIZON shall be facilitated under him. Through which he can see all the business under him. He can see the Target of State Care Center, Regional Heads, District Heads, District Care Centers up to the Agents under him and monitor the Same.

**Level 3:** Level three is the Level of State Care Centers. They are not the employees of the WORK HORIZON. They are simply the State Franchisee by giving certain franchise fees. They have to purchase the portal of WORK HORIZON by Giving Rs: X [Shall be decided by the Office and is variable]. They shall also get a guaranteed income of Rs: Y for M months and after that the incomes will be according to the volume of the Sales under it. The Portal of State Care Centers shall show them their income along with the target, income or business under its hierarchy such as of Region Heads, District Heads, District Care Centers to the Agents at last level.

**Level 4:** Level four is the Level of Regional Heads. For different regions in a state, there will be different Regional Heads. They are the employees of WORK HORIZON and are under direct Pay Roll of the Company. They do not need to purchase the Portal of WORK HORIZON. Once a Person will be appointed as the Regional Head a Free Portal of WORK HORIZON shall be facilitated under him. Through which he can see all the business under him. He can see the District Heads, District Care Centers up to the Agents under him and monitor the Same.

**Level 5:** Level five is the Level of District Head. For different Districts in a state, there will be one or more District Heads. They are the employees of WORK HORIZON and are under direct Pay Roll of the Company. They do not need to purchase the Portal of WORK HORIZON. Once a Person will be appointed as the District Head a Free Portal of WORK HORIZON shall be facilitated under him. Through which he can see all the business under him. He can see the Target of District Care Centers, Care Executives up to the Agents under him and monitor the Same.

**Level 6:** Level six is the Level of District Care Centers. They are not the employees of the WORK HORIZON. They are simply the District Franchisee by giving certain franchise fees. They have to purchase the portal of WORK HORIZON by Giving Rs: X [Shall be decided by the Office and is variable]. They shall also get a guaranteed income of Rs: Y for M months and after that the incomes will be according to the volume of the Sales under it. The Portal of State Care Centers shall show them their income along with the target, income or business under its hierarchy such as of Care Executives, Common Care Centers to the agents.

**Level 7:** Level seven is the Level of Care Executives. For different blocks in a district, there will be one or more Care Executives. They are the employees of WORK HORIZON and are under direct Pay Roll of the Company. They do not need to purchase the Portal of WORK HORIZON. Once a Person will be appointed as the Care Executive a Free Portal of WORK HORIZON shall be facilitated under him. Through which he can see all the business under him. He can see the Target of Common Care Centers, Mini Care Centers, and Agents under him and monitor the Same.

**Level 8:** Level Eight is the Level of Common Care Centers. They are not the employees of the WORK HORIZON. They are simply the franchisee of Block level by giving certain franchise fees. They have to purchase the portal of WORK HORIZON by Giving Rs: X [Shall be decided by the Office and is variable]. They shall also get a guaranteed income of Rs: Y for M months and after that the incomes will be according to the volume of the Sales under it. The Portal of Common Care Centers shall show them their income along with the target, income or business under its hierarchy such as of Mini Common Care Centers and the agents.

**Level 9:** Level Nine is the Level of Mini Common Care Centers. They are not the employees of the WORK HORIZON. They are simply the Franchisee of Village/Town level by giving certain franchise fees. They have to purchase the portal of WORK HORIZON by Giving Rs: X [Shall be decided by the Office and is variable]. They shall also get a guaranteed income of Rs: Y for M months and after that the incomes will be according to the volume of the Sales under it. The Portal of Mini Care Centers shall show them their income along with the target, income or business of the Agents.

**Level 10:** Level 10 is the Level of Agents. They are so how the employees of the company and directly engaged in providing the products and services to the customers. There portal should show them their target and income.

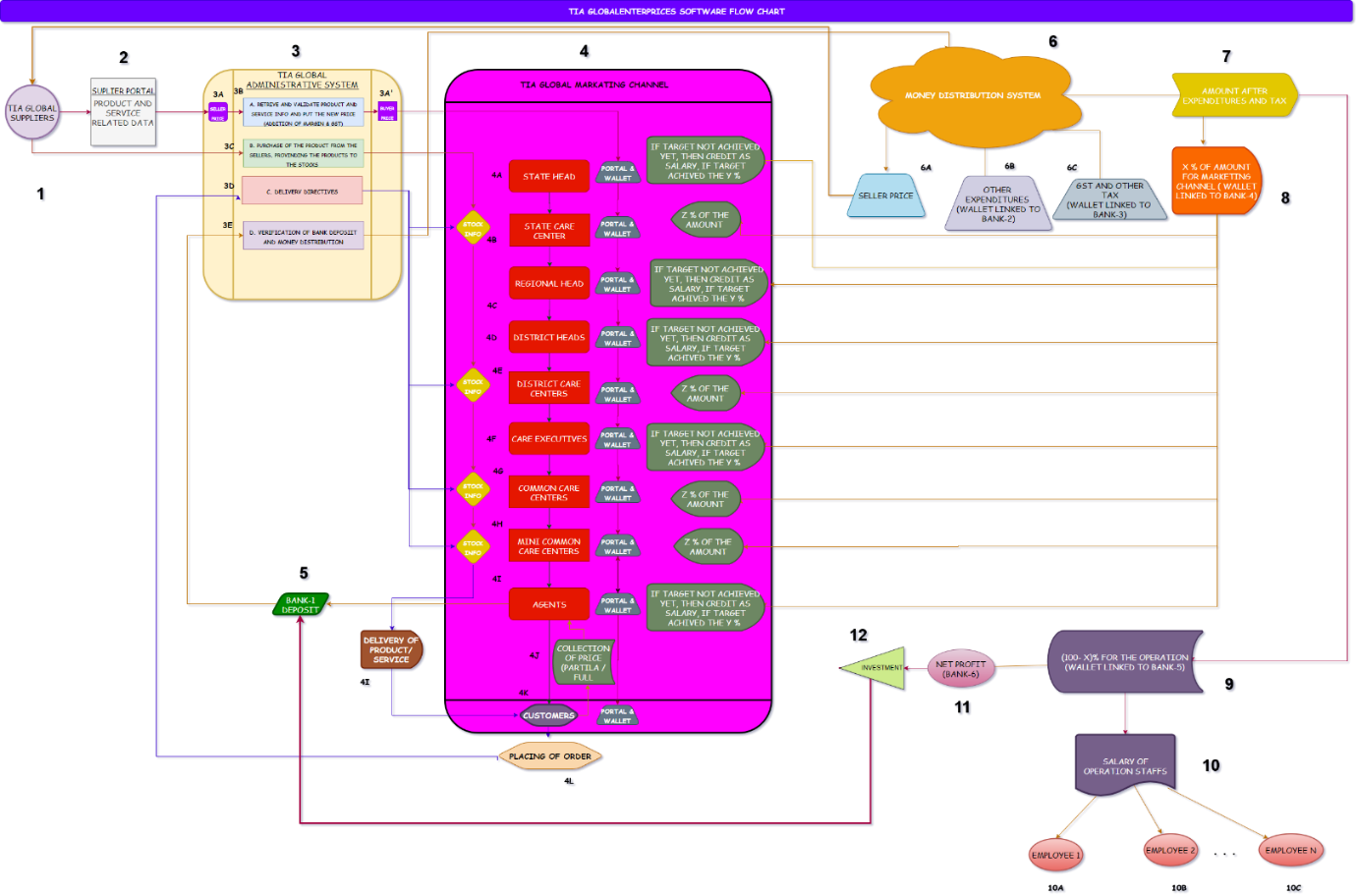
**\*\* All the Portal Should display the Products and Services facilitated by WORK HORIZON. It shall also show the pricing of the products + the Transportation Charges. \*\***

**B. Operational Structure:** The Operational Structure is Simple. All the employees shall be under the HR Department. Employees shall get their own portal in which they can see their Designation, Name of Supervisor, attendance, Leaves, Salary Slips etc. The Office shall credit the amount in the wallets/ bank accounts of the employees in each and every month.

**C.** **Supply chain Structure:** A supplier has to register itself in the portal of WORK HORIZON. It has to add the description and Price of the Products and Services in the WORK HORIZON. They will also get the free portals. They will also get the order through their portals and once dispatched update the same in the portal. The Money from the WORK HORIZON shall be credited in advance / after delivery of the product which shall be suitable and as per the agreement.

**D.** **Control System:** There shall be 3-4 administrators who shall monitor the entire system and can modify anything. Different tasks shall be distributed among different persons and one will be the head administrator of the system capable of monitoring the administrators.

1. WORK HORIZON SOFTWARE STRUCTURE AND ITS WORK**:**

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* The Entire Software Shall work from the Website of WORK HORIZON, i.e; from [www.WORKHORIZONglobal.in](http://www.tiaglobal.in) . Every party should log in through the software do their work from that only. The entire structure and requirements are mentioned detailly below.

## Part:1 & 2 (Supplier to WORK HORIZON & Supplier Portal):

* They are the individuals/ firms who supply the products through WORK HORIZON. They may also provide their services through WORK HORIZON. (*Note: WORK HORIZON works just like an intermediary and sell the product and services through its marketing channel only.)*
* **Registration:** 
  + The First and foremost thing a Supplier needs to do is to register himself or its firm as a supplier to WORK HORIZON.
  + The WORK HORIZON website shall facilitate a Form of Registration for the Supplier. Suppliers can be Individuals or Firms. The form of Registration should ask for the below information.

1. **Individual/ Firm:** User has to Choose one option and accordingly the form shall be shown.

**If Individual; show the below form:**

1. Type: Product/ Service / Both
2. Name of The Supplier: (Mandatory Field)
3. Photo of the Supplier: (Optional Field)
4. Fathers Name: (Mandatory Field)
5. Mothers Name: (Optional Field)
6. Date of Birth: (Mandatory Field)
7. Address: (Mandatory Field)
8. Contact Number: (Mandatory Field)
9. Alternative Contact Number:
10. Mail ID: (Mandatory Field)
11. PAN Card Number: (Mandatory Field)
12. Account Information: (Account Number, Bank Name, Branch Address, IFSC Code) (Mandatory Field)
13. Upload one Address Proof and one Identity Proof: (Mandatory Field)
14. GSTIN Number: (Optional Field)
15. List of Products, Description and Price: ***[If Selected at a)]***
16. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(Name) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Description \_\_\_\_\_\_\_\_\_\_\_\_\_ (Quantity) [Numbers/ Packets/ Weight] \_\_\_\_\_\_\_\_\_\_\_Variant\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Price for WORKHORIZON \_\_\_\_\_\_\_\_\_\_\_\_Address of Dispatch
17. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(Name) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Description \_\_\_\_\_\_\_\_\_\_\_\_\_ ( Quantity) [Numbers/ Packets/ Weight] \_\_\_\_\_\_\_\_\_\_\_Variant \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Price for WORKHORIZON \_\_\_\_\_\_\_\_\_\_\_\_Address of Dispatch
18. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(Name) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Description \_\_\_\_\_\_\_\_\_\_\_\_\_ ( Quantity) [Numbers/ Packets/ Weight] \_\_\_\_\_\_\_\_\_\_\_Variant \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Price for WORKHORIZON \_\_\_\_\_\_\_\_\_\_\_\_Address of Dispatch
19. ……………………………… Upto the number of Products the person want to enter.
20. List of Services, Description and Price: ***[If Selected at a)]***
21. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(Name of the Service) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Description \_\_\_\_\_\_\_\_\_\_\_Variant \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Price
22. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(Name of the Service) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Description \_\_\_\_\_\_\_\_\_\_\_Variant \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Price
23. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(Name of the Service) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Description \_\_\_\_\_\_\_\_\_\_\_Variant \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Price
24. …………………… upto the number of Services the person want to enter.
25. **Acceptance of Terms and Conditions, Captcha** and **SUBMIT**

**If Firm; show the below form:**

1. Type: Product/ Service / Both
2. Name of the Firm: (Mandatory Field)
3. Name of The Proprietor/ Managing Director/ Authorized Person: (Mandatory Field)
4. Date of Incorporation: (Mandatory Field)
5. Address: (Mandatory Field)
6. Contact Number: (Mandatory Field)
7. Alternative Contact Number:
8. Mail ID: (Mandatory Field)
9. PAN Card Number: (Mandatory Field)
10. Account Information: (Account Number, Bank Name, Branch Address, IFSC Code) (Mandatory Field)
11. Upload one Address Proof and one Identity Proof: (Mandatory Field)
12. GSTIN Number: (Manatory Field)
13. List of Products, Description and Price: ***[If Selected at a)]***
14. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(Name) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Description \_\_\_\_\_\_\_\_\_\_\_\_\_ ( Quantity) [Numbers/ Packets/ Weight] \_\_\_\_\_\_\_\_\_\_\_Variant\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Price for WORKHORIZON \_\_\_\_\_\_\_\_\_\_\_\_Address of Dispatch
15. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(Name) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Description \_\_\_\_\_\_\_\_\_\_\_\_\_ ( Quantity) [Numbers/ Packets/ Weight] \_\_\_\_\_\_\_\_\_\_\_Variant \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Price for WORKHORIZON \_\_\_\_\_\_\_\_\_\_\_\_Address of Dispatch
16. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(Name) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Description \_\_\_\_\_\_\_\_\_\_\_\_\_ ( Quantity) [Numbers/ Packets/ Weight] \_\_\_\_\_\_\_\_\_\_\_Variant \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Price for WORKHORIZON \_\_\_\_\_\_\_\_\_\_\_\_Address of Dispatch
17. ……………………………… Upto the number of Products the person want to enter.
18. List of Services, Description and Price: ***[If Selected at a)]***
19. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(Name of the Service) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Description \_\_\_\_\_\_\_\_\_\_\_Variant \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Price
20. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(Name of the Service) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Description \_\_\_\_\_\_\_\_\_\_\_Variant \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Price
21. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(Name of the Service) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Description \_\_\_\_\_\_\_\_\_\_\_Variant \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Price
22. …………………… upto the number of Services the firm wants to enter.
23. **Acceptance of Terms and Conditions, Captcha** and **SUBMIT**

* **Post Registration:** After the Registration is done by the Supplier, A registration token code shall be mailed and messaged to the given mail Id and Contact Information.
* **Validation, Confirmation, Portal Allocation:** Once a Person/Firm Register itself as a Supplier of WORK HORIZON, a request of Verification shall be sent to the **Administrator-1**. He needs to login to his portal. The administrator needs to validate the information provided by the supplier. **Administrator-1** can **Modify** the information while Validating. It can **Accept** or **Reject** the application of the supplier. If **Rejected**, A mail of rejection shall be sent to the Applier. If **Accepted,** a Portal of Supplier shall be generated.
* **Portal of Supplier:** Once **Administrator-1** Accepted the request of the Supplier, A **Supplier Code** Shall be Generated. A **Portal** should be allotted for the supplier. A Mail and Message shall be sent to the Supplier containing the **Username:** (Supplier Code); Password: (Any random Number.) by using which the supplier can log in to the portal.
* **Portal Services:**
* **Login and Logout Options**
* **Displays its Supplied Code and Name at the TOP.**
* **Display the Products and Services it is Supplying.**
  + **Add new Product of Service** (Administrator Acceptance Required)
  + **Modify Existing Products or Service** (Administrator Acceptance Required)
  + **Remove Existing Product or Service** (Administrator Acceptance Required)
* **Display the Order**
  + It displays the order placed by WORK HORIZON. The supplier has to acknowledge the **Receipt** of the Order. ***[This shall show the Address to Delivery the Product]***
  + Once the supplier dispatched the order to WORKHORIZON, it has to click on **Dispatched Order** along with it has to fill up a dispatched form.
  + The **Dispatch form** shall contain:
    1. Mode of Transportation:
    2. Vehicle/ Courier Information:
    3. Agents/Drivers Number:
    4. Location to which it is sending: (Whether directly to the Customer or to the Branch Channel of WORK HORIZON).
* **Status of Delivery**
* **Display the Balance**
  + **Current Wallet Balance (**This is the Balance Pending and to be paid by WORK HORIZON. Every Week/ 15 days it shall clear the balance of the supplier by crediting the amount in the account. Once the amount is cleared, the Wallet will be Zero or the difference of the amount)
  + **Balance Received till now**
* **Display the Transaction History**
  + **Display the Order that has been Dispatched and the Money it received**
* **Display its Profile**
  + **Change Password** (No Administrator Acceptance Required)
  + **Change Address and Contact INFO** (Administrator Acceptance Required)
  + **Change Account Details.**
  + **A form of Support / HELP/ Complaint.** (Administrator shall contact the person when filled).

## Part:3 (WORK HORIZON Administrative Portal):

There will be 4 Administrators in WORKHORIZON whose responsibility is to monitor and conduct all the activities of WORK HORIZON through the Software.

1. Administrator:1🡪 **Admin:1** is responsible for Activity no 3A, 3 A’ and 3B. Admin:1 Shall do the verification of the supplier and all such supplier related tasks.

* Once a New Product is entered to the Database of there is any modification of the product/ service by the supplier, Admin:1 needs to validate that.
* After Validation, Admin-1 Shall put a new price to the Product/ Service. **[New Price= Seller Price+ General Average Cost+ GST + Other Expenditures]**
* Admin:1 has to decide the Transportation Cost for State Care Center, District Care Center, Common Care Center and Mini Care Center for every Product/ Service.
* Once new Price is fixed, he shall click on **Publish.** The same Product/ Service shall be visible to the Marketing Channel of the WORK HORIZON as well as in the Website of WORK HORIZON. **[The Website should show the Transportation fees additionally]**
* Admin-1 Shall also fix the rate of Distribution of income to the Marketing Channel for the Product and Services.

**Portal of Admin:1**

* **LOGIN AND LOGOUT OPTION FOR ADMIN**
* **Change Password Option.**
* **LIST OF SUPPLIERS 🡪 LIST OF PRODUCTS / SERVICES AND ITS PRICE🡪 FILED TO ADD COST, GST AND OTHER EXPENDITURES🡪 FIELD TO ADD TRANSPORTATION COST [ACCORDING TO THE STATE CARE CENTERS, DISTRICT CARE CENTERS, COMMON CARE CENTERS, AND MINI CARE CENTERS]🡪Publish/ Unpublish Product or Service.** [Published/ Unpublished items Separately]
* **Generate Product ID.**
* **REQUEST OF NEW SUPPLIER [Accept/Reject/ Modify Form]**
* **SHOW/ CHANGE PASSWORD OF SUPPLIER**
* **REMOVE SUPPLIER**
* **REMOVE OR MODIFY PRODUCT/SERVICE**
* **REQUEST OF PRODUCTS/SERVICE MODIFICATION / ADDITION / DELETION**
* **FIX THE RATE OF DISTRIBUTION FOR THE PRODUCTS AND SERVICES.**

1. Administrator:2🡪 **Admin:2** is responsible for the Activity 3C and 3D. It shall provide the order to the supplier. It is also responsible for maintaining the Marketing Channel.

* Once a Marketing Personnel Order something through the channel, Admin:2 needs to validate the order, send a request to the stocks/ suppliers to dispatch the product.
* Admin-2 shall keep track of the status of the delivery of the Product.
* Admin-2 shall keep track of the Inventory present at different centers of WORK HORIZON.
* Admin-2 shall place the order to the suppliers, ensures its delivery to the stocks. Calculate the Transportation Cost and send it to the **Admin:3**
* Admin-2 shall also map the State Heads, Regional Heads, Care Executives, and Agents, Provide them their Portal Username and Password along with their Personal Mail Id.

**Portal of Admin: 2**

* **Login and Logout Option**
* **Change Password Option.**
* **Inventory Details by District Center, Common Care Center, Mini Common Care Center**
* **Order Validation (Price Received or not)🡪 Request of Dispatch to nearest Center/ Dispatch through Channel of Centers. [Admin Has to create a command in case of multilevel Transfer]** [A Form Shall be attached in which Admin shall navigate one by one by entering the intermediary to deliver the product at the end customer and accordingly the instruction shall be sent to the intermediary i.e to State Care Centers, District Care Centers, Common Care Centers or Mini Common Care Centers]

**FORM:**

* Add Destination:1 (Instruction Given To the Center)
* Add Destination:2 ( Instruction Given To the Center)
* Add Destination- N ( N is the Final Destination) ( Instruction Given To the Center)
* **Verify Return of A Product and MAP the Destination of the Product.**
* **Order Validation Check (In Case of Automatic Transaction)**
* **Tracking of Delivery of the Products.**
* **An Option to Place the Order from Supplier** [A form will be attached to insert the place to which the supplier shall send the product/Service]
* **Update the Status of Delivery of Product.**
* **Calculate the Total Delivery Cost and Put it.**
* **REQUEST OF NEW CARE CENTERS (STATE/DISTRICT/COMMON/ MINI CARE) [MODIFY/ ACCEPT AND REJECT]**
* **VALIDATING THE AMOUNT DEPOSIT BY THE CARE CENTERS TOWARDS NEW CENTERS**
* **POSITIONING/ MAPPING OF THE CARE CENTERS [STATE/ DISTRICT/ COMMON CARE / MINI COMMON CARE ]**
* **POSITIONING/ MAPPING OF DIFFERENT HEADS (STATE/DISTRICT/CARE EXECUTIVE/AGENT)**
* **GENERATE USERNAME, PASSWORD, MAIL ID FOR DIFFERENT HEADS AND AGENTS.**
* **Map the Online Customers to the Nearby Centers.**
* **REMOVE THE CARE CENTERS / HEADS**
* **TRANSFER THE HEADS.**
* **ALLOCATE THE LOCALITY TO THE CENTERS/ HEADS/ OFFICERS**
* **ADD/ MODIFY / REMOVE MONTHLY TARGET**
* **ADD/MODIFY / REMOVE NEW BONUS ADVERTISEMENT.**

1. Administrator:3🡪 **Admin:3** is responsible for distributing the finance among the Supplier, Marketing Team, Office Staffs, Government, and other stakeholders. It is responsible for 3E,5, 6A,6B,6C, 7, 8, 9,10,11 and 12 Activity.

* The Care Centers has to deposit the amount in the Bank Account of WORK HORIZON on every next business day and need to put the transaction Id in their Portal. Once deposited Admin-3 has to distribute the amount into different Wallets.
* Admin:3 has to cross check the same and clear/ deduct the pending balance of the care centers.
* Admin:3 shall distribute the amount to sellers, Marketing Channels, Official Staffs and other persons.
* Admin-3 Shall also confirm the deposit of the Franchisee fees by the Centers and Distribute it into different Wallets.
* It shall also send the amount for investment purpose.

**Portal of Admin: 3**

* **Login and Logout Option**
* **Change Password Option.**
* **Verification and Modify the Wallet Balance**
* **Deposit the money to Supplier and Modify the Wallet**
* **Deposit the money to the Tax Wallet**
* **Deposit the Money to Expenditure Wallet.**
* **Deposit the amount into Other Wallets.**
* **Fix the Percentage and Deposit the amount to the Account of Marketing Staffs and Centers. Deposit the Transportation Cost. Add Bonus Where Applicable.**
* **Deposit the Commission for making a new Franchisee as a Common Care Center/ Mini Common Care Center/ State Care Center or District Care center on the wallet of the person under whom the same is registered through the Bonus Wallet and divide the fees into different wallets.**
* **Deposit the Guaranteed INCOME to the Account of the Care Centers.**
* **Deposit the Amount in Care/ Agents Wallet, if Product is Returned.**
* **Deposit the Amount to Operation Wallet and to the Employees at the End of the Month.**
* **Deposit the Amount to Investment Wallet.**

1. Head Administrator 🡪 Head Administrator is the Head of Admin-1,2 and 3. He can do all the operations what Admin-1,2 and 3 can do and hence all the portal services shall be integrated into the Portal of Administrator.

**Basically, Head Administrator has to cross check and approve the transaction done by Admin-3. Admin-3 can only iniWORKHORIZONte the transaction, however, it shall come into effect only after Head Administrator approve the same. Head Administrator can also change the Password of Admin-1, 2 and 3.**

## Part:4 (WORK HORIZON Marketing Channel):

The Marketing Channel of WORK HORIZON is a 7 Level Channel. This Seven Level Channel Can be can be operated into two parts:

1. Registration. (Registration Portal)
2. Operation. (Operation Portal)
3. **REGISTRATION:**

* The Registration Process for the “Centers” are different from the “Heads” or Care Officers. “Heads” and “Care Officers”/ “Agents” are the employees of WORK HORIZON, however “Center” Owners are Franchisee, who get the authorization from WORK HORIZON to facilitate the Business in their allocated Area. Hence “Center” holders need to pay a certain amount to have access to the Portal of WORK HORIZON. But “Heads” and Care Officers shall get free Portals.

1. Registration Process of Centers**:**

* There will be a Single Form available in the **Portal of** **State Heads/ State Care Centers/ District Heads/ District Care Centers/ Common Care Centers/ Common Care Executives/ Mini Common Care Centers/ Agents** for the interested persons who want to be the Franchisee of WORK HORIZON. The Franchisee can be the owner of a **State Care Center** or **District Care Center** or the **Common Care Center** or **Mini Common Care Center.**
* A form is also available in the Website for the person who wants to be the Franchisee by Directly Communicating the Head Office of WORK HORIZON.

#### REGISTRATION PROCESS FOR STATE CARE CENTER:

* **FORM for State Care Center Should Contain the Following CredenWORKHORIZONls:**
  1. **Select a State [From the Available States]**
  2. Name of The Person: (Mandatory Field)
  3. Photo of the Person: (Optional Field)
  4. Fathers Name: (Mandatory Field)
  5. Mothers Name: (Optional Field)
  6. Date of Birth: (Mandatory Field)
  7. Address: (Mandatory Field)
  8. Contact Number: (Mandatory Field)
  9. Alternative Contact Number:
  10. Mail ID: (Mandatory Field)
  11. PAN Card Number: (Mandatory Field)
  12. Account Information: (Account Number, Bank Name, Branch Address, IFSC Code) (Mandatory Field)
  13. Upload one Address Proof and one Identity Proof: (Mandatory Field)
  14. GSTIN Number: (Optional Field)
  15. **Acceptance of Terms and Conditions, Captcha** and **SUBMIT**
* Once the form is filled up a **Token Number** shall be generated and sent to the interested person through the mail ID. A request to **Administrator:2** for Verification shall be sent. Once the details are being Verified, **Administrator-2** shall send a request letter to the interested person for iniWORKHORIZONl payment towards Portal Fees and Franchise Fees.
* A link shall be sent to Mail ID of the interested Person in which after payment, he has to enter the following Details:
  1. TOKEN NUMBER: (Mandatory Field, Fetched Automatically)
  2. REGISTERED MOBILE NUMBER: (Mandatory Field)
  3. MODE OF PAYMENT: (Cheque/ RTGS/ NEFT/ IMPS/DD)
  4. CHEQUE NUMBER/ DD NUMBER/ TRANSACTION NUMBER:
  5. BANK NAME:
* Once the Same information shall be sent by the interested Person, **Administrator-2** shall allot the Username and Password of the Portal to the Person allot him the **State Care Center.**
* **Administrator-2** Shall also MAP its Position, between State Head and District Head. [Where any of the Channel is not available, the mapping shall be done to the higher or lower Hierarchy].
* **Administrator-3** Shall check under whose portal the State Care Center has been registered and add X % of the Franchisee fees to the Portal of the person/ center who created the new Center.
* **Administrator-3** Shall also fix the Guaranteed income of the New Center for X months and the amount will be Y. The same shall be added in the Wallet of the Center on the 1st Day of the Month **deducing the Wallet Balance.** [Explanation: Let’s Say for A State Care Center Mr. A paid Rs: 10,000/-. Let’s Assume His Guaranteed income will be Rs:1000/- for 4 Months. *[Note: The amount and Months are Variable for different State Franchisee, and shall be fixed at the time of Portal Allotment]* Now for the Next 4 months he will definitely get Rs:1000/- or More than that. Now say there are 2 conditions: 1) What if he had already an income of Rs: 1000 or more than that and the same is reflecting in the Wallet??, At the same time No additional Money shall be Credited in the Wallet. 2) IF only the income for the month is less than 1000, then only the difference amount shall be credited. For example, if the income is 600, another 400 additional money shall be credited in the wallet on the 1st Day of the Next Month. The same shall happen for the first 4 months only after that only the person is entitled of the income what he incurred]

1. REGISTRATION PROCESS FOR DISTRICT CARE CENTER**:**

* **FORM for District Care Center Should Contain the Following CredenWORKHORIZONls:**

1. Select a State:
2. **Select a District under the State: [From a Set of Available District]**
3. Name of The Person: (Mandatory Field)
4. Photo of the Person: (Optional Field)
5. Fathers Name: (Mandatory Field)
6. Mothers Name: (Optional Field)
7. Date of Birth: (Mandatory Field)
8. Address: (Mandatory Field)
9. Contact Number: (Mandatory Field)
10. Alternative Contact Number:
11. Mail ID: (Mandatory Field)
12. PAN Card Number: (Mandatory Field)
13. Account Information: (Account Number, Bank Name, Branch Address, IFSC Code) (Mandatory Field)
14. Upload one Address Proof and one Identity Proof: (Mandatory Field)
15. GSTIN Number: (Optional Field)
16. **Acceptance of Terms and Conditions, Captcha** and **SUBMIT**

* Once the form is filled up a **Token Number** shall be generated and sent to the interested person through the mail ID. A request to **Administrator:2** for Verification shall be sent. Once the details are being Verified, **Administrator-2** shall send a request letter to the interested person for iniWORKHORIZONl payment towards Portal Fees and Franchise Fees.
* A link shall be sent to Mail ID of the interested Person in which after payment, he has to enter the following Details:
  1. TOKEN NUMBER: (Mandatory Field, Fetched Automatically)
  2. REGISTERED MOBILE NUMBER: (Mandatory Field)
  3. MODE OF PAYMENT: (Cheque/ RTGS/ NEFT/ IMPS/DD)
  4. CHEQUE NUMBER/ DD NUMBER/ TRANSACTION NUMBER:
  5. BANK NAME:
* Once the Same information shall be sent by the interested Person, **Administrator-2** shall allot the Username and Password of the Portal to the Person and allot him the **District Care Center.**
* **Administrator-2** Shall also **MAP** its Position, between District Head and Care Executives. [Where any of the Channel is not available, the mapping shall be done to the higher or lower Hierarchy]
* **Administrator-3** Shall check under whose portal the District Care Center has been registered and add X % of the Franchisee fees to the Portal of the person/ center who created the new Center.
* **Administrator-3** Shall also fix the Guaranteed income of the New Center for X months and the amount will be Y. The same shall be added in the Wallet of the Center on the 1st Day of the Month **deducing the Wallet Balance.** [Explanation: Let’s Say for A District Care Center Mr. A paid Rs: 10,000/-. Let’s Assume His Guaranteed income will be Rs:1000/- for 4 Months. *[Note: The amount and Months are Variable for different State Franchisee, and shall be fixed at the time of Portal Allotment]* Now for the Next 4 months he will definitely get Rs:1000/- or More than that. Now say there are 2 conditions: 1) What if he had already an income of Rs: 1000 or more than that and the same is reflecting in the Wallet??, At the same time No additional Money shall be Credited in the Wallet. 2) IF only the income for the month is less than 1000, then only the difference amount shall be credited. For example, if the income is 600, another 400 additional money shall be credited in the wallet on the 1st Day of the Next Month. The same shall happen for the first 4 months only after that only the person is entitled of the income what he incurred]

1. REGISTRATION PROCESS FOR COMMON CARE CENTER**:**

* **FORM for District Care Center Should Contain the Following CredenWORKHORIZONls:**

1. Select a State:
2. Select a District [Under the State]:
3. **Select a Block under the District: [From the Available List]**
4. Name of The Person: (Mandatory Field)
5. Photo of the Person: (Optional Field)
6. Fathers Name: (Mandatory Field)
7. Mothers Name: (Optional Field)
8. Date of Birth: (Mandatory Field)
9. Address: (Mandatory Field)
10. Contact Number: (Mandatory Field)
11. Alternative Contact Number:
12. Mail ID: (Mandatory Field)
13. PAN Card Number: (Mandatory Field)
14. Account Information: (Account Number, Bank Name, Branch Address, IFSC Code) (Mandatory Field)
15. Upload one Address Proof and one Identity Proof: (Mandatory Field)
16. GSTIN Number: (Optional Field)
17. **Acceptance of Terms and Conditions, Captcha** and **SUBMIT**

* Once the form is filled up a **Token Number** shall be generated and sent to the interested person through the mail ID. A request to **Administrator:2** for Verification shall be sent. Once the details are being Verified, **Administrator-2** shall send a request letter to the interested person for iniWORKHORIZONl payment towards Portal Fees and Franchise Fees.
* A link shall be sent to Mail ID of the interested Person in which after payment, he has to enter the following Details:
  1. TOKEN NUMBER: (Mandatory Field, Fetched Automatically)
  2. REGISTERED MOBILE NUMBER: (Mandatory Field)
  3. MODE OF PAYMENT: (Cheque/ RTGS/ NEFT/ IMPS/DD)
  4. CHEQUE NUMBER/ DD NUMBER/ TRANSACTION NUMBER:
  5. BANK NAME:
* Once the Same information shall be sent by the interested Person, **Administrator-2** shall allot the Username and Password of the Portal to the Person and allot him the **Common Care Center.**
* **Administrator-2** Shall also **MAP** its Position, between Care Executives and Mini Common Care Centers. [Where any of the Channel is not available, the mapping shall be done to the higher or lower Hierarchy]
* **Administrator-3** Shall check under whose portal the Common Care Center has been registered and add X % of the Franchisee fees to the Portal of the person/ center who created the new Center.
* **Administrator-3** Shall also fix the Guaranteed income of the New Center for X months and the amount will be Y. The same shall be added in the Wallet of the Center on the 1st Day of the Month **deducing the Wallet Balance.** [Explanation: Let’s Say for A Common Care Center Mr. A paid Rs: 10,000/-. Let’s Assume His Guaranteed income will be Rs:1000/- for 4 Months. *[Note: The amount and Months are Variable for different State Franchisee, and shall be fixed at the time of Portal Allotment]* Now for the Next 4 months he will definitely get Rs:1000/- or More than that. Now say there are 2 conditions: 1) What if he had already an income of Rs: 1000 or more than that and the same is reflecting in the Wallet??, At the same time No additional Money shall be Credited in the Wallet. 2) IF only the income for the month is less than 1000, then only the difference amount shall be credited. For example, if the income is 600, another 400 additional money shall be credited in the wallet on the 1st Day of the Next Month. The same shall happen for the first 4 months only after that only the person is entitled of the income what he incurred]

1. REGISTRATION PROCESS FOR MINI COMMON CARE CENTER**:**

* **FORM for Mini Common Care Center Should Contain the Following CredenWORKHORIZONls:**

1. Select a State:
2. Select a District[Under the State]:
3. Select a Block under the District:
4. **Select a Locality Under the Block: [From the Available List]**
5. Name of The Person: (Mandatory Field)
6. Photo of the Person: (Optional Field)
7. Fathers Name: (Mandatory Field)
8. Mothers Name: (Optional Field)
9. Date of Birth: (Mandatory Field)
10. Address: (Mandatory Field)
11. Contact Number: (Mandatory Field)
12. Alternative Contact Number:
13. Mail ID: (Mandatory Field)
14. PAN Card Number: (Mandatory Field)
15. Account Information: (Account Number, Bank Name, Branch Address, IFSC Code) (Mandatory Field)
16. Upload one Address Proof and one Identity Proof: (Mandatory Field)
17. GSTIN Number: (Optional Field)
18. **Acceptance of Terms and Conditions, Captcha** and **SUBMIT**

* Once the form is filled up a **Token Number** shall be generated and sent to the interested person through the mail ID. A request to **Administrator:2** for Verification shall be sent. Once the details are being Verified, **Administrator-2** shall send a request letter to the interested person for iniWORKHORIZONl payment towards Portal Fees and Franchise Fees.
* A link shall be sent to Mail ID of the interested Person in which after payment, he has to enter the following Details:
  1. TOKEN NUMBER: (Mandatory Field, Fetched Automatically)
  2. REGISTERED MOBILE NUMBER: (Mandatory Field)
  3. MODE OF PAYMENT: (Cheque/ RTGS/ NEFT/ IMPS/DD)
  4. CHEQUE NUMBER/ DD NUMBER/ TRANSACTION NUMBER:
  5. BANK NAME:
* Once the Same information shall be sent by the interested Person, **Administrator-2** shall allot the Username and Password of the Portal to the Person and allot him the **Mini Common Care Center.**
* **Administrator-2** Shall also **MAP** its Position, between Common Care Centers and Agents. [Where any of the Channel is not available, the mapping shall be done to the higher or lower Hierarchy]
* **Administrator-3** Shall check under whose portal the Mini Common Care Center has been registered and add X % of the Franchisee fees to the Portal of the person/ center who created the new Center.
* **Administrator-3** Shall also fix the Guaranteed income of the New Center for X months and the amount will be Y. The same shall be added in the Wallet of the Center on the 1st Day of the Month **deducing the Wallet Balance.** [Explanation: Let’s Say for A Mini Common Care Center Mr. A paid Rs: 10,000/-. Let’s Assume His Guaranteed income will be Rs:1000/- for 4 Months. *[Note: The amount and Months are Variable for different State Franchisee, and shall be fixed at the time of Portal Allotment]* Now for the Next 4 months he will definitely get Rs:1000/- or More than that. Now say there are 2 conditions: 1) What if he had already an income of Rs: 1000 or more than that and the same is reflecting in the Wallet??, At the same time No additional Money shall be Credited in the Wallet. 2) IF only the income for the month is less than 1000, then only the difference amount shall be credited. For example, if the income is 600, another 400 additional money shall be credited in the wallet on the 1st Day of the Next Month. The same shall happen for the first 4 months only after that only the person is entitled of the income what he incurred]

1. Registration Process of Heads and Agents**:** The Registration Process for State Heads, District Heads, Regional Heads, Care Executives, and Agents are Same. They are recruited through the Recruitment Process of WORK HORIZON. Once Recruited they shall be allotted with a Portal and a Mail Address. The work of the **Administrator-2** is to MAP their position in the Appropriate Channel. However, after the recruitment, they shall be facilitated with a form to enter their details so that the Portal can be allotted to them.

**FORM:**

1. Select the Designation: (Pre Filled/Automatically)
2. Name of The Person: (Mandatory Field)
3. Photo of the Person: (Mandatory Field)
4. Fathers Name: (Mandatory Field)
5. Mothers Name: (Optional Field)
6. Date of Birth: (Mandatory Field)
7. Address: (Mandatory Field)
8. Contact Number: (Mandatory Field)
9. Alternative Contact Number:
10. Mail ID: (Mandatory Field)
11. PAN Card Number: (Mandatory Field)
12. Account Information: (Account Number, Bank Name, Branch Address, IFSC Code) (Mandatory Field)
13. Upload one Address Proof and one Identity Proof: (Mandatory Field)
14. **Acceptance of Terms and Conditions, Captcha** and **SUBMIT**
15. Registration Process of Customers**:** Customers are segmented into two parts. A) Direct Customer B) Customers through Agents C) Online Customer.

The Direct Customers shall always visit the Care Centers of WORK HORIZON and Place the Order therein. They will not get any Portal from WORKHORIZON. They shall always place the order by paying the full amount in advance.Once paid the order number shall be given to them. They can only inquire about the status of delivery of the product by entering the Order number in the Website of WORK HORIZON.

The Category-II types customers are Customers through Agents. It is the sole responsibility of the Agents to get the order from them and collect the money from them. Agents through their Portal can Register a Customer by using form.

The Category-III types of customers are Online Customers, they shall place the order directly from the E-Commerce Website of WORK HORIZON. Once an order is placed, the same customer shall be linked to the Mini Common Care Center near him and the order shall be delivered through the Mini Common Care Centers. IF cash on Delivery is selected, it is the duty of the mini common care centers/ Agents to collect and deposit the cash.

1. PORTAL**:**

Like the Registration Process, the Portal of the Care Centers and Heads/Care Executives/ Agents are different and belongs to one Category. They are hereby discussed briefly:

1. PORTAL OF STATE HEAD**:**

* **Login and Logout Options**
* **Login to Mail Option.**
* **Displays its Employee Code, Name, Allotted State.**
* **Display the Products and Services for the State. [No Selling Option Here, only Display]**
* **FRANCHISEE REGISTRATION PANEL🡪 FORM TO BE A FRANCHISE ( State Care Centers/ District Care Centers/ Common Care Centers/ Mini Common Care Centers)** [As described in PART-4.I.a]
* **TARGET OF A PARTICULAR MONTH and Additional Comments/ Instructions.**
* **Display the Channel under him/her and their Business.**
  + **TARGET – TARGET ALLOTTED / ACHIEVED TARGET [ FOR STATE CARE CENTERS/ REGIONAL HEADS/ DISTRICT HEADS/ DISTRICT CENTERS / COMMON CARE EXECUTIVES/ COMMON CARE CENTERS/ MINI COMMON CARE CENTERS AGENTS]**
  + **PENDING / DEPOSITED AMOUNT.**
  + **ORDER PLACED UNDER ITS CHANNEL- DELIVERY STATUS- PAYMENT STATUS**
* **Display the Balance:**
  + **If target not achieved yet, Salary = 0, Incentive= 0**
  + **If Target is achieved, Salary= Full Salary, Incentive= X (Add Incentive on Selling of each product/ Service under it.) [Incentive shall be cleared on a weekly basis]**
  + **If Salary is not achieved, the system should Calculate how many portions of the Salary is Achieved. [Hidden]**
* **Transaction History and Salary Slip.**
* **Display its Profile**
  + **Change Photo**
  + **Change Password** (No Administrator Acceptance Required)
  + **Change Address and Contact Info** (Administrator Acceptance Required)
  + **Add/ Remove Account Details**
  + **A form of Support / HELP/ Complaint.** (Administrator shall contact the person when filled).

1. PORTAL OF STATE CARE CENTER**:**

* **Login and Logout Options**
* **Displays its Franchisee Code, Name, Allotted State.**
* **Display the Products and Services for the State. [Direct Selling Option Here] [Generate Order Code here]**
* **FRANCHISEE REGISTRATION PANEL🡪 FORM TO BE A FRANCHISE (State Care Centers/ District Care Centers/ Common Care Centers/ Mini Common Care Centers)** [As described in PART-4.I.a]
* **TARGET OF A PARTICULAR MONTH and Additional Comments/ Instructions.**
* **Display the Channel under him/her and their Business.**
  + **TARGET – TARGET ALLOTTED / ACHIEVED TARGET [FOR REGIONAL HEADS/ DISTRICT HEADS/ DISTRICT CENTERS / COMMON CARE EXECUTIVES/ COMMON CARE CENTERS/ MINI COMMON CARE CENTERS AGENTS]**
  + **PENDING / DEPOSITED AMOUNT.**
  + **ORDER PLACED UNDER ITS CHANNEL- DELIVERY STATUS- PAYMENT STATUS**
* **INVENTORY DETAILS: [STOCK OPTION]**
  + **Current List of Inventory. (Name, Quantity, Price)**
  + **Add New products/ Services to the Inventory.**
  + **Sell a Product/ Service (If available in the Inventory Sell Directly, if not available request made to the office (Admin-2) to dispatch the Product. [Generate Order Code here]**
  + **Dispatch Requests from Office for available products to other Centers / Customers. [Instruction]**
  + **Dispatch a Product**
  + **Add transportation Cost (Upload Bill along with)**
  + **Return a Product. [Form need to be designed]**

**FORM:**

1. Product ID:
2. Order Code:
3. Reason for Return:
4. Return Address:
5. Amount Paid Towards Return (**Administrator-3 Shall Verify the Return and Add the Amount in the Wallet)**
6. Transportation Cost:

* **Display the Balance:**
  + **Display the Target.**
  + **Display the Wallet Balance [Amounts shall be credited in the Bank account on a weekly basis]**
  + **Receive Cash Payment from Agents.**

**FORM:**

1. Agent Code:
2. Amount:
   * **Amount Needs to be Deposited in the Bank Accounts of WORK HORIZON.**

**FORM: (After Deposit)**

1. Mode of Transaction: NEFT/ RTGS/IMPS/ CHALLAN
2. Transaction Number:
3. Amount:

* **Transaction History.**
* **Display its Profile**
  + **Change Photo**
  + **Change Password** (No Administrator Acceptance Required)
  + **Change Address and Contact Info** (Administrator Acceptance Required)
  + **Add/ Remove Account Details**
  + **A form of Support / HELP/ Complaint.** (Administrator shall contact the person when filled and submitted).

1. PORTAL OF Regional HEAD**:**

* **Login and Logout Options**
* **Login to Mail Option.**
* **Displays its Employee Code, Name, Allotted Region.**
* **Display the Products and Services for the Region. [No Selling Option Here, only Display]**
* **FRANCHISEE REGISTRATION PANEL🡪 FORM TO BE A FRANCHISE (State Care Centers/ District Care Centers/ Common Care Centers/ Mini Common Care Centers)** [As described in PART-4.I.a]
* **TARGET OF A PARTICULAR MONTH and Additional Comments/ Instructions.**
* **Display the Channel under him/her and their Business.**
  + **TARGET – TARGET ALLOTTED / ACHIEVED TARGET [FOR DISTRICT HEADS/ DISTRICT CENTERS / COMMON CARE EXECUTIVES/ COMMON CARE CENTERS/ MINI COMMON CARE CENTERS AGENTS]**
  + **PENDING / DEPOSITED AMOUNT.**
  + **ORDER PLACED UNDER ITS CHANNEL- DELIVERY STATUS- PAYMENT STATUS**
* **Display the Balance:**
  + **If target not achieved yet, Salary = 0, Incentive= 0**
  + **If Target is achieved, Salary= Full Salary, Incentive= X (Add Incentive on Selling of each product/ Service under it.) [Incentive shall be cleared on a weekly basis]**
  + **If Salary is not achieved, the system should Calculate how many portions of the Salary is Achieved. [Hidden]**
* **Transaction History and Salary Slip.**
* **Display its Profile**
  + **Change Photo**
  + **Change Password** (No Administrator Acceptance Required)
  + **Change Address and Contact Info** (Administrator Acceptance Required)
  + **Add/ Remove Account Details**
  + **A form of Support / HELP/ Complaint.** (Administrator shall contact the person when filled).

1. PORTAL OF District HEAD**:**

* **Login and Logout Options**
* **Login to Mail Option.**
* **Displays it's Employee Code, Name, Allotted District.**
* **Display the Products and Services for the District. [No Selling Option Here, only Display]**
* **FRANCHISEE REGISTRATION PANEL🡪 FORM TO BE A FRANCHISE (State Care Centers/ District Care Centers/ Common Care Centers/ Mini Common Care Centers)** [As described in PART-4.I.a]
* **TARGET OF A PARTICULAR MONTH and Additional Comments/ Instructions.**
* **Display the Channel under him/her and their Business.**
  + **TARGET – TARGET ALLOTTED / ACHIEVED TARGET [FOR DISTRICT CENTERS / COMMON CARE EXECUTIVES/ COMMON CARE CENTERS/ MINI COMMON CARE CENTERS AGENTS]**
  + **PENDING / DEPOSITED AMOUNT.**
  + **ORDER PLACED UNDER ITS CHANNEL- DELIVERY STATUS- PAYMENT STATUS**
* **Display the Balance:**
  + **If target not achieved yet, Salary = 0, Incentive= 0**
  + **If Target is achieved, Salary= Full Salary, Incentive= X (Add Incentive on Selling of each product/ Service under it.) [Incentive shall be cleared on a weekly basis]**
  + **If Salary is not achieved, the system should Calculate how many portions of the Salary is Achieved. [Hidden]**
* **Transaction History and Salary Slip.**
* **Display its Profile**
  + **Change Photo**
  + **Change Password** (No Administrator Acceptance Required)
  + **Change Address and Contact Info** (Administrator Acceptance Required)
  + **Add/ Remove Account Details**
  + **A form of Support / HELP/ Complaint.** (Administrator shall contact the person when filled).

1. PORTAL OF DISTRICT CARE CENTER**:**

* **Login and Logout Options**
* **Displays its Franchisee Code, Name, Allotted DISTRICT.**
* **Display the Products and Services for the District. [Direct Selling Option Here] [Generate Order Code here]**
* **FRANCHISEE REGISTRATION PANEL🡪 FORM TO BE A FRANCHISE (State Care Centers/ District Care Centers/ Common Care Centers/ Mini Common Care Centers)** [As described in PART-4.I.a]
* **TARGET OF A PARTICULAR MONTH and Additional Comments/ Instructions.**
* **Display the Channel under him/her and their Business.**
  + **TARGET – TARGET ALLOTTED / ACHIEVED TARGET [CARE EXECUTIVES/AGENTS/ MINI COMMON CARE Centers/ COMMON CARE CENTERS]**
  + **PENDING / DEPOSITED AMOUNT.**
  + **ORDER PLACED UNDER ITS CHANNEL- DELIVERY STATUS- PAYMENT STATUS**
* **INVENTORY DETAILS: [STOCK OPTION]**
  + **Current List of Inventory. (Name, Quantity, Price)**
  + **Add New products/ Services to the Inventory.**
  + **Sell a Product/ Service (If available in the Inventory Sell Directly, if not available request made to the office (Admin-2) to dispatch the Product. [Generate Order Code here]**
  + **Dispatch Requests from Office for available products to other Centers / Customers. [Instruction]**
  + **Dispatch a Product**
  + **Add transportation Cost (Upload Bill along with)**
  + **Return a Product. [Form need to be designed]**

**FORM:**

1. Product ID:
2. Order Code:
3. Reason for Return:
4. Return Address:
5. Amount Paid Towards Return (**Administrator-3 Shall Verify the Return and Add the Amount in the Wallet)**
6. Transportation Cost:

* **Display the Balance:**
  + **Display the Target.**
  + **Display the Wallet Balance [Amounts shall be credited in the Bank account on a weekly basis]**
  + **Receive Cash Payment from Agents.**

**FORM:**

1. Agent Code:
2. Amount:
   * **Amount Needs to be Deposited in the Bank Accounts of WORK HORIZON.**

**FORM: (After Deposit)**

1. Mode of Transaction: NEFT/ RTGS/IMPS/ CHALLAN
2. Transaction Number:
3. Amount:

* **Transaction History.**
* **Display its Profile**
  + **Change Photo**
  + **Change Password** (No Administrator Acceptance Required)
  + **Change Address and Contact Info** (Administrator Acceptance Required)
  + **Add/ Remove Account Details**
  + **A form of Support / HELP/ Complaint.** (Administrator shall contact the person when filled and submitted).

1. PORTAL OF Common Care Executives**:**

* **Login and Logout Options**
* **Login to Mail Option.**
* **Displays its Employee Code, Name, Allotted Block:**
* **Display the Products and Services for the Block. [No Selling Option Here, only Display]**
* **FRANCHISEE REGISTRATION PANEL🡪 FORM TO BE A FRANCHISE (State Care Centers/ District Care Centers/ Common Care Centers/ Mini Common Care Centers)** [As described in PART-4.I.a]
* **TARGET OF A PARTICULAR MONTH and Additional Comments/ Instructions.**
* **Display the Channel under him/her and their Business.**
  + **TARGET – TARGET ALLOTTED / ACHIEVED TARGET [FOR CARE CENTERS/AGENTS/ MINI COMMON CARE Centers]**
  + **PENDING / DEPOSITED AMOUNT.**
  + **ORDER PLACED UNDER ITS CHANNEL- DELIVERY STATUS- PAYMENT STATUS**
* **Display the Balance:**
  + **If target not achieved yet, Salary = 0, Incentive= 0**
  + **If Target is achieved, Salary= Full Salary, Incentive= X (Add Incentive on Selling of each product/ Service under it.) [Incentive shall be cleared on a weekly basis]**
  + **If Salary is not achieved, the system should Calculate how many portions of the Salary is Achieved. [Hidden]**
* **Transaction History and Salary Slip.**
* **Display its Profile**
  + **Change Photo**
  + **Change Password** (No Administrator Acceptance Required)
  + **Change Address and Contact Info** (Administrator Acceptance Required)
  + **Add/ Remove Account Details**
  + **A form of Support / HELP/ Complaint.** (Administrator shall contact the person when filled).

1. PORTAL OF COMMON CARE CENTER**:**

* **Login and Logout Options**
* **Displays its Franchisee Code, Name, Allotted Block.**
* **Display the Products and Services for the Block. [Direct Selling Option Here] [Generate Order Code here]**
* **FRANCHISEE REGISTRATION PANEL🡪 FORM TO BE A FRANCHISE (State Care Centers/ District Care Centers/ Common Care Centers/ Mini Common Care Centers)** [As described in PART-4.I.a]
* **TARGET OF A PARTICULAR MONTH and Additional Comments/ Instructions.**
* **Display the Channel under him/her and their Business.**
  + **TARGET – TARGET ALLOTTED / ACHIEVED TARGET [FOR AGENTS/ Mini Common Care Centers]**
  + **PENDING / DEPOSITED AMOUNT.**
  + **ORDER PLACED UNDER ITS CHANNEL- DELIVERY STATUS- PAYMENT STATUS**
* **INVENTORY DETAILS: [STOCK OPTION]**
  + **Current List of Inventory. (Name, Quantity, Price)**
  + **Add New products/ Services to the Inventory.**
  + **Sell a Product/ Service (If available in the Inventory Sell Directly, if not available request made to the office (Admin-2) to dispatch the Product. [Generate Order Code here]**
  + **Dispatch Requests from Office for available products to other Centers / Customers. [Instruction]**
  + **Dispatch a Product**
  + **Add transportation Cost (Upload Bill along with)**
  + **Return a Product. [Form need to be designed]**

**FORM:**

1. Product ID:
2. Order Code:
3. Reason for Return:
4. Return Address:
5. Amount Paid Towards Return (**Administrator-3 Shall Verify the Return and Add the Amount in the Wallet)**
6. Transportation Cost:

* **Display the Balance:**
  + **Display the Target.**
  + **Display the Wallet Balance [Amounts shall be credited in the Bank account on a weekly basis]**
  + **Receive Cash Payment from Agents.**

**FORM:**

1. Agent Code:
2. Amount:
   * **Amount Needs to be Deposited in the Bank Accounts of WORK HORIZON.**

**FORM: (After Deposit)**

1. Mode of Transaction: NEFT/ RTGS/IMPS/ CHALLAN
2. Transaction Number:
3. Amount:

* **Transaction History.**
* **Display its Profile**
  + **Change Photo**
  + **Change Password** (No Administrator Acceptance Required)
  + **Change Address and Contact Info** (Administrator Acceptance Required)
  + **Add/ Remove Account Details**
  + **A form of Support / HELP/ Complaint.** (Administrator shall contact the person when filled and submitted).

1. PORTAL OF MINI COMMON CENTER**:**

* **Login and Logout Options**
* **Displays its Franchisee Code, Name, Allotted Locality.**
* **Display the Products and Services for the Locality. [Direct Selling Option Here] [Generate Order Code here]**
* **FRANCHISEE REGISTRATION PANEL🡪 FORM TO BE A FRANCHISE (State Care Centers/ District Care Centers/ Common Care Centers/ Mini Common Care Centers)** [As described in PART-4.I.a]
* **TARGET OF A PARTICULAR MONTH and Additional Comments/ Instructions.**
* **Display the Channel under him/her and their Business.**
  + **TARGET – TARGET ALLOTTED / ACHIEVED TARGET [AGENTS]**
  + **PENDING / DEPOSITED AMOUNT.**
  + **ORDER PLACED UNDER ITS CHANNEL- DELIVERY STATUS- PAYMENT STATUS**
  + **Display the Customers of the Agents and the amount pending to be collected.**
* **INVENTORY DETAILS: [STOCK OPTION]**
  + **Current List of Inventory. (Name, Quantity, Price)**
  + **Add New products/ Services to the Inventory.**
  + **Sell a Product/ Service (If available in the Inventory Sell Directly, if not available request made to the office (Admin-2) to dispatch the Product. [Generate Order Code here]**
  + **Dispatch Requests from Office for available products to other Centers / Customers. [Instruction]**
  + **Dispatch a Product**
  + **Add transportation Cost (Upload Bill along with)**
  + **Return a Product. [Form need to be designed]**

**FORM:**

1. Product ID:
2. Order Code:
3. Reason for Return:
4. Return Address:
5. Amount Paid Towards Return (**Administrator-3 Shall Verify the Return and Add the Amount in the Wallet)**
6. Transportation Cost:

* **Display the Balance:**
  + **Display the Target.**
  + **Display the Wallet Balance [Amounts shall be credited in the Bank account on a weekly basis]**
  + **Receive Cash Payment from Agents.**

**FORM:**

1. Agent Code:
2. Amount:
   * **Amount Needs to be Deposited in the Bank Accounts of WORK HORIZON.**

**FORM: (After Deposit)**

1. Mode of Transaction: NEFT/ RTGS/IMPS/ CHALLAN
2. Transaction Number:
3. Amount:

* **Transaction History.**
* **Display its Profile**
  + **Change Photo**
  + **Change Password** (No Administrator Acceptance Required)
  + **Change Address and Contact Info** (Administrator Acceptance Required)
  + **Add/ Remove Account Details**
  + **A form of Support / HELP/ Complaint.** (Administrator shall contact the person when filled and submitted).

1. PORTAL OF AGENTS**:**

* **Login and Logout Options**
* **Displays its Agent Code, Name, Allotted Center:**
* **Display the Products and Services for the Center.**
  + **Place A order for the Customer.** [Agents can place the order for the customer and the Product shall be dispatched from the Mini Common Care Center or from the Care Centers. The Agent is responsible towards the Payment of such Order. The Agent needs to deposit the amount in the Common Care Center/ Use online Transfer Method before Getting the Product Delivered.]
  + **Dispatch Requests from Office for available products to other Centers / Customers. [Instruction]**
  + **Updating the Delivery Status in the System.**
  + **Accepting Cash Less/ Cash Payment.**
  + **Return a Product. [Form need to be designed]**

**FORM:**

1. Product ID:
2. Order Code:
3. Reason for Return:
4. Return Address:
5. Amount Paid Towards Return (**Administrator-3 Shall Verify the Return and Add the Amount in the Wallet)**
6. Transportation Cost:

* **FRANCHISEE REGISTRATION PANEL🡪 FORM TO BE A FRANCHISE (State Care Centers/ District Care Centers/ Common Care Centers/ Mini Common Care Centers)** [As described in PART-4.I.a]
* **TARGET OF A PARTICULAR MONTH and Additional Comments/ Instructions.**
* **Display the Balance:**
  + **If target not achieved yet, Salary = 0, Incentive= 0**
  + **If Target is achieved, Salary= Full Salary, Incentive= X (Add Incentive on Selling of each product/ Service under it.) [Incentive shall be cleared on a weekly basis]**
  + **If Salary is not achieved, the system should Calculate how many portions of the Salary is Achieved. [Hidden]**
* **Customer Details:**
  + **Customer Registration Form:**
    1. Customer Name: (Mandatory Field)
    2. Customer Address: (Mandatory Field)
    3. Customer Mobile Number: (Mandatory Field)
    4. Customer Email ID: (Optional)
  + **List of Customers.**
  + **Place an order for the Customers.**
  + **Products to be delivered to the customers. [If Product is not available now]**
  + **Amount pending to collect from the Customer.**
* **Transaction History and Salary Slip.**
* **Amount Pending to Deposit in the Account of WORK HORIZON. (Amount will be Deposited through the Care Centers).**
* **Display its Profile**
  + **Change Photo**
  + **Change Password** (No Administrator Acceptance Required)
  + **Change Address and Contact Info** (Administrator Acceptance Required)
  + **Add/ Remove Account Details**
  + **A form of Support / HELP/ Complaint.** (Administrator shall contact the person when filled).

1. PORTAL OF Customers**:** No Customers shall get any Portal except the Online Customers. They will be facilitated with a Sign-Up form Online. They can Place the Order directly. Pay through Debit/ Credit Cards/ Other Mediums/ COD. They can keep track of their order online.
   1. **Customer Registration Form:**
      1. Customer Name: (Mandatory Field)
      2. Customer Address: (Mandatory Field)
      3. Customer Mobile Number: (Mandatory Field)
      4. Customer Email ID: (Mandatory Field)

[Once a Customer is Registered **Admin-2** shall map him under the nearby Mini Common Care Center/ Other Centers if Mini Common Care Center is not Available]

* 1. **Login and Logout Option.**
  2. **List of Available Products.**
  3. **Place Order🡪 Put Address🡪 Pay for the Products🡪 Get Confirmation🡪 Track the Status of the Product.**

## Part:5 (Receiving of Money and the Bank Account):

* All the amount shall be deposited in a Single Current Bank Account of WORK HORIZON.
* The Franchisee fees can be Collected through NEFT/RTGS/IMPS/DD/ Cheque only. But the same shall be deposited in One Bank Account. **The same shall be verified by the Administrator. One Transaction number can be used for one time only.**
* For Products and Services, the Payment shall be either received directly from the customer (Online Customers) or through the centers of the WORK HORIZON.
* The Centers of the WORK HORIZON needs to deposit the amount in the account of WORK HORIZON **[by NEFT/RTGS/ CHALLAN (no Cash Deposit) ]** in the next business day. They have to fill up the form after depositing the amount and mentioning the transaction number. The same shall be verified by the Administrator-2 and the pending balance in their wallet shall be cleared.
* **IF ONE CENTER WILL NOT DEPOSIT THE AMOUNT FOR 3 CONSECUTIVE BUSINESS DAYS, THEN ADMIN-3 HAS THE OPTION TO RESTRICT HIM FOR SALING ANY PRODUCTS/ SERVICES. ADMIN-3 SHALL ALSO NOT SEND THE PENDING AMOUNT TO THE CENTER.**

## Part:6 (The Money Distribution Channel):

This Part is solely managed by **Admin- 3** and deals with the Distribution of Money. The Distribution can be of 4 types. And for the 4 types of Distribution 6 Wallets need to be designed.

The types of Wallet here are:

1. **Investment Wallet:** IniWORKHORIZONl Investment or After Profit Investment. The amount of iniWORKHORIZONl investment or the Profit amount shall be Credited into this wallet.
2. **Supplier Distribution Wallet:**  This Wallet contains the amount to be paid to the Supplier.
3. **Transportation Wallet:** The amount towards the transportation of a particular product/ service.
4. **Tax Wallet:** This shall contain total amount to be paid as tax and the tax is credited on a Monthly Basis
5. **Expenditure Wallet:** This wallet shall be credited for any other Expenditures incurred while selling the Product and Services.
6. **Remaining Balance Wallet:** This Wallet shall contain all the remaining amount after the expenditures in PART-6.

The types of Distribution are:

1. Distribution to Supplier.
2. Distribution towards Transportation.
3. Distribution to Government (TAX)
4. Distribution to Other Expenditures.
5. Distribution to Supplier**:**

* There are two Possibilities. 1) Prepaid Purchase. 2) Postpaid Purchase.
* For Prepaid Purchase, the amount shall be credited from the Investment Wallet. **Once the amount of purchase is recovered from the customer, the same amount shall be credited into this wallet and transferred to the Investment Wallet.**
* For Postpaid Purchase, the required Amount shall be paid to the Supplier once the Money towards the Product/ Service credited in the Account of WORK HORIZON. This Payment shall be in phase by phase and amount shall be credited in a Weekly Basis.
* **Let’s Assume the Selling Price of a Product is “S” Rupees. The same amount will be credited in BANK-1 by the Centers. Let’s Say for the Product the Company needs to pay “Y” Rupees to the Supplier. The “Y” Amount shall be credited into the “Supplier Distribution Wallet”. Out of which the amount of supplier shall be paid on a weekly basis. Remaining Amount(R1)= Sales Price(S)- Supplier Price (Y)**
* This Wallet shall show the Current Balance, Pending Balance of Supplier, Pending Balance to the “Investment Wallet.”

1. Distribution towards the Transportation**:**

* A Portion of the Amount shall be credited in the Transportation Wallet after calculating the total cost of Transportation per Product.
* **Let’s Assume for the delivery of the Product total Transportation Cost is “T” Rupees. This “T” Rupees is calculated by combining different transportation Charges”T1”, “T2”, ”T3” and “t” etc and required to distribute among different Centers. “t” is the amount which is directly paid from the company WORK HORIZON. This amount shall only be recovered when the product is sold. Till the timing, the company needs to pay the amount to different Centers. The same amount shall be paid from the “Investment Wallet” and once the product is sold, the same amount shall be again credited into the “Investment Wallet.”**
* **Form the Amount R1** *(As Motioned in a)***, after the product is sold “T” amount shall be credited into Transportation Wallet. The amount which was drawn from the “Investment Wallet” shall be returned. Remaining Amount (R2)= R1- T(Total Transportation Amount)**
* This wallet should show **“Current Balance”, “Pending Balance of Transportation”, “Pending Balance to the Investment Wallet”**

1. Distribution to Government**:**

* The system should calculate the amount of TAX to be paid to the Government on the transactions and the same shall be credited to the government / TAX institutions on a monthly basis.
* **Let's Assume total tax TT=GST + Other taxes. The same amount needed to be deducted from R2 and shall deposit into “TAX Wallet”.**
* **The Remaining Amount (R3)= R2-TT**
* This Wallet should show “Total Tax Amount.”

1. Distribution to Other Expenditures**:**

* A Wallet shall be specially designed for other Expenditures of the Company. This includes promotions, advertisement, Corporate parties etc. A portion of the Monet shall be deposited for Other Expenditures.
* For the Expenses before the Sold out of the Product the amount shall be drawn from the **“Investment Wallet”** and one the product is sold, the amount shall be again credited to **“Investment Wallet”**
* Let’s say E% of R3 shall be credited for other Expenditures of a company.
* **The Remaining Amount is R4= [R3- (E% of R3)]. Here E is variable and the Administrator-3 shall put the value while Transaction.** *[E% of R3 is always equal to or greater than the amount drawn from Investment.].*
* **The R4 Amount shall be credited in a “Remaining Balance Wallet”**
* This “Expenditure “Wallet should show “Total Amount for Expenditures.”

## Part:7 & 8 (The Marketing Distribution Channel):

The Marketing Distribution Channel can again be classified into two parts:

1. The Franchisee Distribution Channel. [For State Care Center, District Care Centers, Common Care Centers and Mini Common Care Centers]

* Franchisee Fee / Portal Fees Distribution.
* Bonus Distribution for making new Centers.
* Guaranteed Income Distribution.
* General Income Distribution.
* Transportation Cost Distribution.
* Return of the Product- Cost distribution.

1. The Marketing Staffs Distribution Chanel. [For State Head, Regional Heads, District Heads, Care Executives, and Agents]

* Salary Distribution.
* Incentive Distribution.
* Bonus Distribution for making new Centers.

The types of Wallet used in this distribution Channel are:

1. **Franchisee Fee Wallet:** The amount of Franchisee fees shall be deposited to this wallet iniWORKHORIZONlly.
2. **Fixed Investment Wallet:** The amount of fixed investment shall be deposited here and invested in fixed deposits.
3. **Guaranteed Income Wallet:** This Wallet shall be used only for the Guaranteed Income of the Centers.
4. **General Income Wallet:** This Wallet shall be used for Paying the General Income to Centers, Salary distribution for marketing channel.
5. **Bonus Distribution Wallet:** This Wallet shall be used to credit the Bonus amount that shall be paid to the Person/center who created a Center.

Except for these wallets, the **Transportation Wallet, Tax Wallet, Remaining Balance Wallet and Investment Wallet** mentioned in Part-6 shall be utilized here.

Let’s discuss the Distribution in briefly.

1. Franchisee Fee / Portal Fees Distribution**:**

* Franchisee Fees/ Portal Fees are completely different from the Price of Product and Services and hence treated completely different Manner.
* Let’s Assume “R” rupees is collected towards the Franchisee Fees. Out of this TA % shall be deducted as Tax and sends to “**TAX Wallet**”. Remaining Amount Rf(1)= R- TA.
* Out of Rf(1)- B% Shall be given to the Center/ Head/ Agent, through which the Franchisee is registered. Remaining franchisee Amount will be: Rf (2) = [Rf(1)- (B% of Rf(1))]. Rf(2) will be credited in “**Bonus Wallet**” and credited to the parties wallet thereafter. [Note: Here only one party shall get the Bonus, through whom the new center is being registered.]
* Out of Rf (2) to FI% amount shall be credited to the “**Fixed Investment Wallet”** and shall be sent for fixed investment. The amount of profit from the fixed investment wallet shall always be credited into the “**Fixed Investment Wallet**”. So the remaining amount will be Rf(3)= Rf(2)- Fixed Investment(F).
* Out of the remaining amount, Rf(3) Op% amount shall be credited to **Operational Wallet** as mentioned in Part- 7 & 9. Remaining Amount Rf (4) = Rf(3)-[Op% of Rf(3)].
* Rf (4) amount shall be credited into “**Investment Wallet**”

1. Bonus Distribution for Making New Centers**:**  The Bonus as mentioned above shall be credited to the wallet of the person/center who registered the new center. However for the State Heads/ Regional Heads/ District Heads/ Customer Care Executives/ Agents, The bonus shall be added to Salary, if target not achieved and if achieved it is added as Incentive. [Please refer to **d. General Income Distribution [Below] for more Clarification**]
2. Guaranteed Income Distribution**:**  As mentioned earlier the new care centers have guaranteed the income of X% for ‘N’ Months.

* The Guaranteed Income of the Centers shall be paid form the Guaranteed income Wallet. It is to note here that the franchise fees of different centers are different and hence the guaranteed income is also different and even the months of guaranteed income are also different.
* The amount for a particular month shall be credited in this manner. For a franchise, let’s say the general income for a month is Rs: Ge. The Guaranteed Income is Gu. The amount which will be credited in the wallet of the Center will be either 0 if Ge> Gu or the amount (Gu-Ge) if Gu>Ge. [Explanation: Let’s Say for A Center Mr. A paid Rs: 10,000/-. Let’s Assume His Guaranteed income will be Rs:1000/- for 4 Months. *[Note: The amount and Months are Variable for different State Franchisee, and shall be fixed at the time of Portal Allotment]* Now for the Next 4 months he will definitely get Rs:1000/- or More than that. Now say there are 2 conditions: 1) What if he had already an income of Rs: 1000 or more than that and the same is reflecting in the Wallet??, At the same time No additional Money shall be Credited in the Wallet. 2) IF only the income for the month is less than 1000, then only the difference amount shall be credited. For example, if the income is 600, another 400 additional money shall be credited in the wallet on the 1st Day of the Next Month. The same shall happen for the first 4 months only after that only the person is entitled of the General income what he incurred]
* The amount to the Guaranteed Income Wallet shall always be credited from **“Fixed Investment Wallet”**. It is to note here that always the full Guaranteed amount shall be drawn from Fixed Investment Wallet. The required amount shall be deposited in the Wallet of the Center. The Rest remaining amount shall be deposited in the “**Investment Wallet**”. [For Example, if Rs:1000 is the Guaranteed Income, Rs:1000 will be drawn from Fixed investment Wallet. Let’s say Rs: 600 Amount is the difference amount (i.e. Gu-Ge), then 600 will be credited to the center's wallet and the remaining 400 shall always be credited in the **Investment Wallet**].

1. General Income Distribution/ Salary and Incentive Distribution**:**  This is the Z% of the remaining amount at “**Remaining Balance Wallet**” mentioned at Part-6 of this documentation.

* Z% of the Remaining amount from Remaining Balance Wallet shall be moved to “**General Income Wallet**”. **The remaining amount shall there in the “Remaining Balance Wallet”. Let’s say GI= Z% of Remaining Balance**
* This **GI amount** Shall always be distributed from the level of purchase of the Product to the upper level, i.e. till the State Heads as follows:
* **If the target of the State Head has already been achieved X1% of GI will be credited as Incentive. Otherwise, the Balance shall be Credited towards the Salary. [The Salary shall be visible only after achieving the Target]**
* X2% of GI shall be credited into the Wallet of State Care Center.
* **If the target of the Regional Head has already been achieved X3% of GI will be credited as Incentive. Otherwise, the Balance shall be Credited towards the Salary. [The Salary shall be visible only after achieving the Target]**
* **If the target of the District Head has already been achieved X4% of GI will be credited as Incentive. Otherwise, the Balance shall be Credited towards the Salary. [The Salary shall be visible only after achieving the Target]**
* X5% of GI shall be credited into the Wallet of the District Care Center.
* **If the target of the Care Executives has already been achieved X6% of GI will be credited as Incentive. Otherwise, the Balance shall be Credited towards the Salary. [The Salary shall be visible only after achieving the Target]**
* X7% of GI shall be credited into the Wallet of the Common Care Center.
* X8% of GI shall be credited into the Wallet of Mini Common Care Center.
* **If the target of the Agents has already been achieved X9% of GI will be credited as Incentive. Otherwise, the Balance shall be Credited towards the Salary. [The Salary shall be visible only after achieving the Target]**
* X10 % of GI can be given as a Cashback to the Customers.
* **Here GI= (X1+X2+X3+X4+X5+X6+X7+X8+X9+X10)% of GI**
* In case a Channel is absent between the Center and Customer, then for that Channel, the Percentage will be Zero and the amount shall again credit to the “**Remaining Balance Wallet**”. For Example, A state Care Center directly sold a product to Customer. Then, in this case, X1% shall go to State Head X2% shall go to State Care Center, X10% shall go to Customer as Cash Back. Except these, all others are 0 and hence X3%, X4%..... X9% of the amount shall again be credited to “**Remaining Balance Wallet**.”

1. Transportation Cost Distribution**:**  The Transportation Cost shall be paid from the “**Transportation Wallet**”, where the centers raised and uploaded the bill of Transportation.
2. Return of the Product- Cost distribution**:** In case a Product is returned by the Customer and a Center has paid towards the return of the product. The same shall be credited into the account of the Center. [**After Verification and reaching of the Product in the Office.**]

## Part: 9 & 10 (The Operation Distribution Channel):

The Remaining amount Shall be distributed to Optional Fees. The rest are Net Profit and will be invested again. This part covers

1. Distribution to Operation:

* A wallet named as “**Operation Wallet**” shall credit the amount for Official Expenditures.
* A portion of the amount as mentioned from the above section [**Franchisee Fee / Portal Fees Distribution]** shall be credited in this Wallet.
* Except that Q% of the Remaining amount from the “**Remaining Balance Wallet**” shall also be used as Operational Charges and shall be Credited into the “**Operation Wallet**”. Now the rest of the amount shall be there in the **Remaining Balance Wallet**.
* The same amount shall be distributed among the operational employees of the organization and shall be utilized for other operation related cost.
* Once an employee will join the organization, he/she shall be facilitated with an Employee Code and Password along with a personalized mail id. He/she needs to fill up the form and needs to provide all the information.
* The Employee through his/her portal can see his salary information and can generate Salary Sheets. He can verify his EPF account statements.

## Part: 11 & 12- (The Net Profit and Investment):

The rest of the amount in the “**Remaining Balance Wallet**” is the net profit and the same can be reinvested at Part-12.

# ADDITIONAL FEATURES OF THE SOFTWARE:

* **Generating total Products/ Service Sells (Quantity wise Descending Order.)**
* **Generating Profit and Loss Statements.**
* **Generating the Tax Statements.**
* **Generating Bills for the Customers.**
* **Calculating GST for the Products and Services.**
* **Generating a weekly list for Payments through Net Banking or Pay Order.**
* **Generating Collect Pay-In Slip so that the Centers can pay in Cash.**
* **Generating the Returned Product List**

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