

WAL-MART

NOTIFICATION OF CLAIM

608 SW 8th Street
Bentonville, Arkansas 72716-0041

ENDOR: All correspondence regarding a claim or your account should be sent this address, Attn: Vendor Communications.

CLAIM NO. KFO-0297-03
(USE STONE # AS THE PREFIX)

FOR INTERNAL USE ONLY

STORE NO. 01-0297	DEPT. NO. 809	CLAIM DATE 10/25/90
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P. O. NUMBER	INVOICE DATE	INVOICE NO.
00	/ /	

**For type (1) only use claim date as invoice date,
claim number as invoice number.**

TO:

Remington Arms Co. Inc.
Hens Service Division
Ilion, NY 13357

(SHIPPING ADDRESS ABOVE)

— STORE INSTRUCTIONS —

- 2) Complete All information on this form. Claims that are Not for Return Merchandise must have the P. O. Number, Invoice Date and Invoice Number correctly entered.

(1) ☒ **MDSE. RETURN**

MUST BE COMPLETED

Authorization No. _____
 Other Authorization all paid & returned
 No Vendor Response _____
 (MDSE DISPOSITION)

Carrier Mailer 177-074-970-2
 U.P.S. No. 7-76-612
 Return Date 10/25/90 A.O.D. _____
 (\$25 Minimum)

(2) ☐ Freight Bill signed short or damage ☐ MUST BE COMPLETED ☐ Cases Received _____ Carrier _____
*Cases Per Frt. Bill _____ * Freight Bill No. _____

*FOB WAL-MART = VENDOR CLAIM --- FOB VENDOR = CARRIER CLAIM

***SIGNED FREIGHT BILL MUST BE ATTACHED TO CLAIM**

(3) ☐ Invoiced But Mds. not received (Vendor to send P.O.D.) (4) ☐ CONCEALED SHORTAGE (SEE BELOW) (5) ☐ PRICE OVERCHARGE (6) ☐ INCORRECT FREIGHT (7) ☐ OTHER

VENDOR: A debit to your account has been made for the reason indicated ➡

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 ONE REASON PER CLAIM

[illegible]

FROM:

WAL-MART STORE # 297
33285 EASTEX FREEWAY.
P.O. DRAWER Z
PORTER, TX. 77365

STORE STAMPS

• OTHER

**TOTAL
DEDUCTION**

**TOTAL
RETAIL**

**TOTAL
COST**

NOTE: A Concealed Shortage is the difference between a Vendor's Packing Slip and that which is counted. All concealed shortages must be verified.

CONCEALED SHORTAGE VERIFIED BY

PREPARED BY

STORE MANAGER

ROUTING: White Copy - GENERAL OFFICE ACCOUNTS PAYABLE; Yellow Copy - STORE COPY; Pink Copy - TO VENDOR WITH MOSE.