

DSW.com

Affiliated Business Group DSW INC.

## **REQUIREMENTS FOR W/T PAYMENT**

Please be advised that we have received and are processing the Purchase Order placed by DSW INC., as described below. Following is a list of the documents required by DSW INC., to release payment against your shipments. A Required Documents Guide designating their wording has been sent to you previously (or is attached to this sending).

When you are ready to request payment, please attach a copy of this page (unchanged) to your request. As well, please complete the "Request for W/T Payment" form and attach it to the FRONT of the documents you present for payment. A set of documents must be sent to: DSW INC, 810 DSW Dr., Columbus, Ohio 43219 Attn: W/T Payment (Lynda Berg).

Please feel free to contact us with any questions.

	Country of Origin:	CHINA
Order:	Payment Terms:	T/T 14 DAYS AFTER CARGO RECEIPT DATE
Dept.		(Terms begin from the date of shipment, but payment
Vendor:		cannot be released until all documentary requirements
Agent:		have been met.)

**Required Documents** 

X	1) Commercial Invoice-Basic		
	1B) Invoice - Buying Agent's Commission		
X	2) Packing List		
X	3) Beneficiary's Certificate – Basic (A-F)		
X	4) Manufacturer's Letter of Guarantee		
X	5) C-TPAT Questionnaire/or DSW Security Certificate		
X	6) Interim Footwear Invoice(if applicable)		
X	7) Inspection Certificate		
X	8) CITES Certificate (if applicable)		
	9) Fish & Wildlife Information Form		
	10) Trademark/Copyright Letter		
X	11) Forwarder's Cargo Receipt		
	12) Certificate of Origin	Other - Description Attached	
X	13) Child Labor Statement		

## **DSW USE ONLY**

Ship Date:	Additional Discrepancies:
Due Date:	
Amount: \$	
Buyer's Signature:	

Revised: June 2013 Section 7

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## **REQUEST FOR W/T PAYMENT**

One complete set of documents has been sent to DSW INC. under AWB:	by (name of Courier Company)
PO #(S):	
COMPANY NAME:	
ACCOUNT NAME: (if different)	-
BANK:	
BRANCH: (Including City, Country)	
ACCOUNT#:	
ABA#:	
IBAN # (European)	
SWIFT CODE:	
(If Applicable) FOR FURTHER CREDIT TO: BENEFICIARY:	
BANK:	
BRANCH: (Including City, Country)	
ACCOUNT#:	
ABA#:	
SWIFT CODE:	
TOTAL W/T AMOUNT: \$	
SIGNATURE:	
NAME: (Printed or Typed)	
TITLE:	

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