

IF.

## **Advance Shipping Notice / Receipt Verification**

FORM-0071 Revision 12 1/2/2013

		Page Number		er	of						
Todays date:		ASN #					Supplier Name:				
	Ship date: _ Planned arrival date:			_				Tracking or	Dro #r		
	_							Tracking of	FIU#.		
(FEL 4-K)	/-183-4M-00108)										
PO #	Part Number	Part Name	Quantity Due	Lot # (Every Lot # must include a quantity)	Quantity Actual	Variance	# Boxes	Receiving (√)	Purchasing (√)	QA (√)	Reason and ship date for Variance (It is important for you to fill out accurate! to avoid expedite fee)
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DSSA Use Only - Initial and Date				Burchasing			Accounting			Inveice Number	
<b>N</b> -+-		Data		Purchasing Date		Date		Invoice Number Date			
Deliver To: DSSA 720 Old Liberty Church Road Beaver Dam, KY 42320 Phone: 270-274-2600 Fax: 270-274-0750			* Note: Supplier Must ID any parts. Labeled -Engineering (Blue) -First Article (Orange) -Quality Review (Yellow) -Dock To Stock-					Contact: William (Bill) Green Supply Chain Management Manager/ Procurement Group Leader <u>b_green@dssa.daicel.com</u>			
or e-mail	Fax: 270-730-6734										

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