

**Buyer/Vendor Freight Negotiation Form - OUTBOUND**

Date:

Vendor Name:

Vendor Number:

Department Number & Buyer Name:

Return Authorization #:

Type of Freight (i.e.: Handbags):

Vendor Freight Amount or %:

Dry Goods Freight Amount or %:

Vendor Contact:

<p>TO BE COMPLETED BY THE VENDOR:</p> <p>Return Address:</p> <p>Attention:</p> <p>VENDOR SIGNATURE*: _____</p>
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DRY GOODS BUYER SIGNATURE\*: \_\_\_\_\_

DRY GOODS LOGISTICS MANAGER\*: \_\_\_\_\_

COMMENTS:

Please sign and email back the information requested on this form to the attention of the appropriate Buyer. The signing of this form using an electronic method voids the agreement. This form should only be used when deviating from the Compliance Guide.

