

**SECURITY AND SUPPLY CHAIN FORM 1.4A  
FACTORY**

DATE OF ARRIVAL: \_\_\_\_\_

RETURN TO DUCKWALL/ALCO STORES, INC.

TIME OF ARRIVAL: \_\_\_\_\_

TIME OF DEPARTURE: \_\_\_\_\_

DATE OF DEPARTURE: \_\_\_\_\_

PRODUCT WEIGHT: \_\_\_\_\_

PRODUCT CBM'S: \_\_\_\_\_

PIECE COUNT: \_\_\_\_\_

DESCRIPTION: \_\_\_\_\_

CONTAINER #: \_\_\_\_\_

SEAL #. \_\_\_\_\_

FACTORY NAME: \_\_\_\_\_

FACTORY ADDRESS: \_\_\_\_\_

AUTHORIZED CONTACT: \_\_\_\_\_

JOB TITLE: \_\_\_\_\_

PHONE/FAX #: \_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_

AUTHORIZED SIGNATURE: \_\_\_\_\_



Save time. Save fuel. Save money!

401 COTTAGE AVENUE ABILENE, KANSAS 67410

PHONE: 785-263-3350 X121 FAX: 785-263-7531

E-MAIL: IMPORTDESK@ALCOSTORES.COM

- 1) SEAL MUST BE VERIFIED BY AUTHORIZED PERSONNEL ONLY
- 2) PICTURE OF SEAL AND CONTAINER MUST BE ATTACHED TO FORM
- 3) FORM MUST BE SIGNED BY AUTHORIZED PERSONNEL ONLY
- 4) FORM MUST BE COMPLETED AND FAXED/E-MAILED TO DUCKWALL/ALCO WITHIN THE HOUR OF ARRIVAL/DEPARTURE
- 5) BY NOT FOLLOWING SECURITY PROCEDURES COULD RESULT IN PENALTIES