

MDS Fulfillment – New / Revised / Obsolete / Scrap

INVENTORY STATUS CHANGE ADVANCE SHIPPING NOTICE (ASN)

Use this form to communicate NEW, REVISED, OR OBSOLETE INVENTORY items/changes. List one item per box. Use additional forms / pages if more than 7 items. Check (double-click) all appropriate boxes per each item. Fax or e-mail to MDS.
FAX: 414-760-0480 **E-MAIL:** asn@mdsfulfillment.com.

ITEM NO.	ITEM DESCRIPTION	STATUS & MDS ACTION	DATE EXPECTED (NEW) OR EFFECTIVE/ COMMENT	FOR MDS USE
VENDOR/ QUANTITY	DEPARTMENT / DIVISION			
	<input type="checkbox"/> AA <input type="checkbox"/> AB <input type="checkbox"/> AC <input type="checkbox"/> AD <input type="checkbox"/> AE <input type="checkbox"/> AF <input type="checkbox"/> AG <input type="checkbox"/> AH <input type="checkbox"/> AJ <input type="checkbox"/> Other: [_____] DIVISION:	<input type="checkbox"/> New Item <input type="checkbox"/> Replacement <input type="checkbox"/> FIFO <input type="checkbox"/> SCRAP (obsolete)		
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FORM SUBMITTED BY		DATE SENT TO MDS	SIGNATURE	
NAME:				
PHONE:		FAX:		
E-mail:				