



INVOICE/BILLING

ONE INVOICE IS REQUIRED PER PURCHASE ORDER FOR EACH SHIP TO DESTINATION

The invoice must indicate the following -

- Vendor name and address including factory name and payment address if applicable
- Vendor invoice number and date
- Show complete address (see: "Ship to" Location). If direct to store, include full store name and number such as "Van Heusen #179", etc.
- PVH Corp. purchase order number – **PO# must include 2-digit Company and 2-digit Division prefix** – example: RTTO123456
- Department number
- Style number
- Size/style/color information
- Number of cartons shipped
- Mode of transportation
- Quantity specified in dozens or pieces or sets by style (prepacks)
- Unit cost
- Total cost

The original invoice must be accompanied by the bill of lading and mailed to the appropriate division as follows:

For merchandise sold to our **USA retail divisions** –

Division Name – Example: "Calvin Klein Company"

PVH Group

PO Box 6963

Bridgewater, NJ 08807-0963



PVH Corp.

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For merchandise sold to our **Canada Retail Divisions** –

PVH Canada Inc.

DBA - _____
PO Box 6963
Bridgewater, NJ 08807

For the DBA – Please insert the name of the division the merchandise was sold to –

- DBA – Van Heusen Retail
- DBA - Izod Retail
- DBA – Calvin Klein Retail
- DBA – Tommy Hilfiger Retail

Payment terms are specified on the PVH Corp. Purchase Order.

Invoices should be mailed within 7 days of shipment.

INVOICES THAT ARE DONE INCORRECTLY WILL NOT BE PROCESSED AND WILL BE MAILED BACK TO VENDOR. PVH Corp. WILL NOT BE RESPONSIBLE FOR ANY PAYMENT DELAYS DUE TO INCORRECT INVOICING.

SAMPLE MERCHANDISE INVOICES

All invoices for sample merchandise should be sent to the **attention of the person the samples were sent to**. The address on the invoice for all samples should be mailed to:

Division Name – Example “Calvin Klein Company”

PO Box 6963

Bridgewater, NJ 08807-0963



CHECK OUTLINE

See copy for reference.

- Supplier invoice number or PVH Corp. document number (debit memos, chargebacks, etc...) → 1
- Gross amount of invoice/document → 2
- Discount if applicable → 3
- Net invoice/document amount → 4
- Check number must be referenced on all correspondence → 5
- The division of Phillips-Van Heusen that invoice belongs to → 6
- Date of check → 7
- Net total check amount → 8

Sample check next page.



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SAMPLE: CHECK OUTLINE



Phillips-Van Heusen Corporation DETACH ALONG THIS PERFORATION

Vendor No: 1071891

Check Date: 03/17/11

Vendor Name: BRATTLEBORO UNITED STATES

Check Number: 1098420

Invoice Number	Date	Description	Division	Gross	Deductions	Amount Paid
W05119414 8803149	02/27/11 01/20/11	NON COMPLIANCE BAT: 120164-20	Van Heusen Van Heusen	160.00 9,489.72	0.00 284.69	160.00- 9,205.03
1			6	2	3	4
Totals				9,329.72	284.69	9,045.03
						8



CHARGEBACKS

PVH Corp. has established a policy to recover the costs incurred due to vendor non-compliance of requirements specified in this manual. Specific charges are listed in "Non-Compliance Chargeback" section.

Offset amounts are based on the additional time the error creates to process the shipment or payment. The goal is not to generate a chargeback to the vendor, but to receive the shipment in the manner specified.

Any chargebacks will be deducted from the next available check. A debit memo will be sent to provide explanation.

Sample debit memo next page.



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EXAMPLE: DEBIT MEMO - CANADA


PVH CORPORATION			
DEBIT MEMO			
DATE -	NUMBER -		
VENDOR NAME & ADDRESS -	DIVISION		
	Van Heusen Canada		
	Izod Canada		
	Calvin Klein Canada		
	Tommy Hilfiger Canada Outlets		
	Tommy Hilfiger Canada Specialty		
TO DEBIT YOUR ACCOUNT FOR THE FOLLOWING -			
PURCHASE ORDER -			
STORE -			
INVOICE NUMBER -			
SHORTAGES			
PRICE DIFFERENCE			
STYLE SUBSTITUTION			
MARKDOWN ALLOWANCE			
OTHER			
DESCRIPTION	QUANTITY	UNIT COST	EXTENDED COST
AUTHORIZED BY -			
ACCOUNT NUMBER -	GRAND TOTAL -		
<p>PLEASE DIRECT ANY QUESTIONS IN REFERENCE TO THIS DEBIT MEMO TO - 908-685-1155 / MERCHANDISE PAYABLES P.O. BOX 6963, MAILSTOP # 6, BRIDGEWATER, N.J. 08807</p>			



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PVH Corp Shipping Non-Compliance

Category	Supplier
Date Issued	04/02/2014
Control Number	W051430832
Origin	Jonesville
PVH Company	TOMMY OUTLET
Factory Name	
Vendor Name	
Warehouse Rcpt Date	04/01/2014
Purchase Order #	RT-TO-927872
Style/Color	0042-409
Number of Cartons	26
Shipment Auth #	
Container/AWB/Truck	60755531604
ASN Number	E0003274740
GL Account Number	



The referenced shipment was received in non-compliance of our vendor shipping requirements resulting in delays and additional cost to process the receipt. Any questions or correspondence concerning this chargeback can be sent to:

PVH Corp
1001 Frontier Rd
Bridgewater NJ, 08807

Attn: Vendor Compliance Department
Email: vendorcompliance@pvh.com

Violation Code/Description	#Qty	Expense Offset	Totals
N Box/Bag End Label - Missing/Incorrect	1	\$100.00+\$.50EA	\$100.50
Grand Total			\$100.50

Comments

ALL PRODUCT MUST HAVE THE CORRECT UPC BAG STICKERS/HANGTAGS.

Expense Offset: \$100.00 per PO + \$.50 Each



COMMUNICATION

Vendor is requested to notify PVH Corp. in writing for any of the following -

- Change of payment address
- Change of factor assignments or termination of factor agreements
- Change of company name
- Change of address for documents

Please send such notices to -

PVH Retail Group

Attention: Merchandise Accounts Payable Manager

PO Box 6963

Bridgewater, NJ 08807-0963

The following phone numbers and extensions are for the Merchandise Accounts Payable Department. If you should need any assistance, please call -

(908) 685-0050

Direct dial – (908) 698- Ext#

Extensions:

Division	Extensions
Van Heusen	8626
Izod	8626
Calvin Klein Company	8624
Calvin Klein Collections	8624
Tommy Hilfiger Company	5302,6269
Tommy Hilfiger Anchor	5302,6269
Tommy Hilfiger E Commerce	5302,6269
Tommy Hilfiger Specialty	5302,6269
Tommy Hilfiger Canada Company	5302,6269
Tommy Hilfiger Canada Specialty	5302,6269
Van Heusen Canada	8626
Izod Canada	8626
Calvin Klein Canada	8624



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Reference the PVH Corp. check number and date along with the invoice/document number on all correspondence.

For clarification and deduction also send the following

- Copy of deduction
- Letter stating your concern

For shortage deductions, also include

- Copy of relevant invoice
- Proof of delivery

If copies of documents are needed, request must be made in writing. Include a copy of the check and highlight the items desired. Send the request to your account representative at:

**PO Box 6963
Bridgewater, NJ 08807-0963**