

## Material Receiving Verification Form

Date Received

Received By

Supplier

Delivery Note/Invoice No.

PO Number

Location

No.	Material Description	Part/Code	Qty Ordered	Qty Received	Unit	Remarks
<input type="text"/>						
<input type="text"/>						
<input type="text"/>						

Notes/Comments

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Receiver's Signature

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Verified By

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Date