

# Store Merchandise Goods Receipt

Receipt Number

Date

Supplier Name

Store Location

Purchase Order No.

Received By

## Goods Details

No.	Item Description	SKU/Code	Quantity	Unit	Remarks

Delivery Note No.

Condition Upon Receipt

Remarks

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Received By (Signature, Name & Date)

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Checked By (Signature, Name & Date)

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Approved By (Signature, Name & Date)