Consumer Goods Retail Receiving Log

Date Received

_____

Store/Location

_____

Received By

_____

Supplier

_____

Delivery Reference/PO#

_____

#	Product Name / Description	Product Code / SKU	Qty Ordered	Qty Received	Unit	Remarks

Received By (Signature):

_____

Checked By:

_____

Date:

_____