

Goods Receipt Note

Retail Warehouse

GRN No.:

Date:

Supplier Name:

Supplier Invoice No.:

| No. | Item Description | Item Code | Unit | Quantity Ordered | Quantity Received | Remarks |
|-----|------------------|-----------|------|------------------|-------------------|---------|
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

General Remarks:

Received By

Date:

Checked By

Date:

Authorized By

Date: