

## Inventory Stock-In Verification Checklist

Date: \_\_\_\_\_

Received By: \_\_\_\_\_

Supplier: \_\_\_\_\_

Reference/PO No.: \_\_\_\_\_

#	Item Description	Item Code	Quantity Received	Unit	Checked	Remarks
1	_____	_____	_____	_____	<input type="checkbox"/>	_____
2	_____	_____	_____	_____	<input type="checkbox"/>	_____
3	_____	_____	_____	_____	<input type="checkbox"/>	_____
4	_____	_____	_____	_____	<input type="checkbox"/>	_____
5	_____	_____	_____	_____	<input type="checkbox"/>	_____

Verified By: \_\_\_\_\_

Date: \_\_\_\_\_