

Logistics Provider POD Sheet

In-Country Deliveries

Date		POD Ref. No.	
Logistics Provider		Vehicle No.	
Consignee Name		Consignee Contact	
Delivery Address			

#	Item Description	Quantity	Package No.	Remarks

Receiver's Acknowledgement

Received By (Name)		Signature	
Date & Time		Contact	

Delivery Confirmation

Delivered By (Name)		Signature	
Date & Time		Contact	

Receiver's Comments (if any):	
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