



RECEIPT OF MERCHANDISE

Return To: Accounts Payable-

Date:

RE: PO #

Vendor:

IN REFERENCE TO THE ATTACHED INVOICE/CREDIT MEMO: #

(CHECK AND COMPLETE ALL THAT APPLY)

() All items have been received OR () Service/Job is complete
() Full payment may be made.

() Partial Shipment Received - Partial Payment to be made

() Items missing - Description QTY

() Items Returned (Please notify Accounts Payable of all returns whether or not payment has been made)
Description QTY

() Items Rejected / Cancelled (circle one)
Description QTY

() Items to be added to PO (send an email of items to Purchasing listed here)
Item Description _____ Quantity _____ Amount \$ _____
Item Description _____ Quantity _____ Amount \$ _____
Item Description _____ Quantity _____ Amount \$ _____
Item Description _____ Quantity _____ Amount \$ _____

() Line Items to be updated (send an email of items to Purchasing with amount)
Line Item # _____ Quantity _____ Amount \$ _____
Line Item # _____ Quantity _____ Amount \$ _____
Line Item # _____ Quantity _____ Amount \$ _____

Sign & Return (with packing slip) to Accounts Payable
USE BLUE OR RED INK ONLY