

VERIFICATION OF RECEIPT OF GOODS OR SERVICES

This form is to be used by the person that receives and checks in a shipment from an assigned purchase order. Upon completion, it should be forwarded to the fiscal office in your building for prompt payment processing. No payment will be released without this completed form on file. The pink copy of the purchase order will accompany this form to the treasurer's office.

Vendor Number: _____ Vendor Name: _____

Purchase Order #: _____ Date Received: _____

- Order is complete Partial order (backordered items are circled on pink p.o.)

Material or service checked by: _____

RETURN TO FISCAL OFFICE UPON COMPLETION



PAYMENT INSTRUCTIONS

- Change vendor information as stated: _____

- Remit address is different than what is on p.o.: _____

- Prepay this order per vendor's instructions.
- Final pay this amount _____ Partial pay this amount _____
- Cancel this amount on purchase order (all or partial) _____
- Mail check Give check to: _____

Other instructions: _____

Payment authorized by: _____ Date: _____