



INTEGRATED MANAGEMENT SYSTEM

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RECEIPT & INSPECTION REPORT

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RECEIPT & INSPECTION REPORT

Stores Section: Local/ Foreign
Supplier R & I No Date
Purchase Order No Date Reg. No Date
Invoice No Bill of Lading Carriers
Head of Account

Name of Sallers

Sl. No	Part No. /Size	DESCRIPTION	A/U	Quantity	CC	COST	Bill Location	Account Card/ Ledger page No.
					Unit	Total		

Distribution

1 Received by Date
2 Checked by Date
3 Binned Posted by Date
4 Account Posted by Date.....
5
6
8

Certified that the stores have been received in correct quantity and they have been duly recorded in the account card and / Ledger

Section/ Stores Officer / Store -Keeper

Prepared By		Approved By	
Reviewed By			