

Complete this form if a Packing Slip is not provided when receiving an order from uSOURCE.

Departments should retain for their records.

**Department:** \_\_\_\_\_

Supplier Name and Address	_____
Receiving location	_____
	Street Address                      Bldg & Floor / Room Number
Date Received and Inspected	_____
Purchase Order#	_____
Is this a partial shipment?	Yes              No
Received in good condition?	Yes              No
If not received, provide a short explanation	_____
Goods Receipt#	_____
Received By	_____
	Signature                      Name
Additional Information	_____

