

# Goods Receipt Form Sample

Date: \_\_\_\_\_

Goods Receipt No.: \_\_\_\_\_

Supplier Name: \_\_\_\_\_

Supplier Invoice No.: \_\_\_\_\_

Received By: \_\_\_\_\_

Location/Warehouse: \_\_\_\_\_

Item No.	Item Description	SKU/Part No.	Quantity Ordered	Quantity Received	Unit	Condition	Remarks
1	Example Item 1	ABC123	100	100	pcs	Good	
2	Example Item 2	XYZ456	50	49	pcs	Damaged	1 item Broken

Comments/Discrepancies:

\_\_\_\_\_

Received By (Name & Signature): \_\_\_\_\_

Date: \_\_\_\_\_

Verified By (Name & Signature): \_\_\_\_\_

Date: \_\_\_\_\_