Goods-In Inspection

Check deliveries against the purchase order for quantity, damage, documentation and certificates of conformity.

Delivery

Supplier *	
Purchase order number *	
Delivery note number	
Date received *	_____ / _____ / _____
Received by *	

Items

Items 1

Item / part number *	
Quantity ordered	
Quantity received *	
Condition *	☐ Good ☐ Damaged ☐ Wrong item
Certificate of conformity received	☐ Yes ☐ No ☐ N/A
Batch / lot number	
Photo	*Attach photo or sketch*

Items 2

Item / part number *	
Quantity ordered	
Quantity received *	
Condition *	☐ Good ☐ Damaged ☐ Wrong item
Certificate of conformity received	☐ Yes ☐ No ☐ N/A
Batch / lot number	

Photo	*Attach photo or sketch*

Items 3

Item / part number *	
Quantity ordered	
Quantity received *	
Condition *	☐ Good ☐ Damaged ☐ Wrong item
Certificate of conformity received	☐ Yes ☐ No ☐ N/A
Batch / lot number	
Photo	*Attach photo or sketch*

Result

Delivery accepted? *	☐ Accepted ☐ Accepted with issues ☐ Rejected
Issues	
Signature *	

* Required