

Receipt & Authorization of Payment Report



After receiving your order, please complete each section of this form and forward it to Accounts Payable.

Receipt Report

Name _____ Location _____

Document Type _____

Vendor Name _____ Purchase Order # _____

Invoice Date _____ Invoice # _____

Authorization Checklist

- All Items Received - Pay Invoice and Close Purchase Order
- Expecting Additional Shipment - Do Not Pay Invoice or Close Purchase Order
- Items Ordered without Purchase Order (Please Explain in Additional Information)
- Other _____

Additional Information _____

I certify the above information is correct and accurate to the best of my knowledge.