

Food Service Inventory Receiving Report

Date:

Time:

Received By:

Vendor Name:

Invoice Number:

PO Number:

| Item Description | Quantity Ordered | Quantity Received | Unit | Condition / Quality | Temperature (if applicable) | Comments |
|------------------|------------------|-------------------|------|---------------------|-----------------------------|----------|
| | | | | | | |
| | | | | | | |
| | | | | | | |

Notes / Discrepancies:

Receiver's Signature:

Date: