

INSPECTION AND ACCEPTANCE REPORT

University of the Philippines - Diliman

Agency

Supplier: _____

AR No. : _____

Date: _____

PO No.: _____

Invoice No.: _____

Date: _____

Requisitioning Office/Dept.: _____

Stock No. (DATE)	Unit (O.R. #)	Description (ARTICLE)	Quantity	Amount
TOTAL				

INSPECTION

ACCEPTANCE

Date Inspected : _____

Inspected, verified and found in order as to

Authorized Inspector

Noted by: _____

Faculty Adviser

Date Received : _____

Complete

Partial (Please specify quantity)

Project Coordinator