Vendor's Name.  Date:  Vendor's Address:  Waybill no:  Delivery Point:  Purpose:	Receipt Note 134 Steel Ind	L/WH/
S/N       Material Code         1.       1.         2.       3.         4.       5.         6.       7.         8.       9.         10.       11.         12.       13.         14.       15.         16.       17.	Description of Materials	Qty Remarks  LOOM CLUS
18. 19. 20. 21. 22. 23. 24.  PERSONNEL NAME  THE PROPERSON MEMbere  MEMbere  MEMbere  MEMbere  MEMbere  MEMbere  MEMbere  MEMbere	DESIGNATION  QAQC REP.  SECURITY REP.  STORE/WAREHOUSE REP.	SIGNATURE DATE  SIGNATURE SIGNATURE  SIGNATURE  SIGNATURE SIGNATURE  SIGNA