

## **Receiving Report Form**

Document Code	FM-AMC-001
Revision Number	03
Effectivity	FEB 06, 2023
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Α.	Unit (School   Departm	nent   Office)			UNIT Code	AMC-RR No.	Date
0	ffice of the Vic	e President for Financ	е	•	SNA	RR005567	16-Oct-2023
	Purchase goods and services	☐ Transfer of property and equipment	<ul><li>☑ Donation</li><li>☐ Grant</li></ul>	☑ Othe	er (specify):		
•	Reference (Purchase Order / Requisition Slip / Document No.   Date): PO-123456 17 Aug 2023						
•			Purchas		ry Receipt / Acknowledg	gment Receipt)	

B. Item Descri	ption				
Asset Tag	Particulars (Asset Description   Brand   Model)	Serial Number	Asset Class	Qty	UOM
00001001-SCS	Monitor ASUS VK222H	ABCD123456EFGH	OFE	1	
00001002-SCS	Monitor ASUS VK222H	IJKL789012MNOP	OFE	1	
00001002-SCS	Monitor ASUS VK222H	QRST345678UVWX	OFE	1	
Received b	y: God Ric Tam Pinco				
	Ro Vin Nav Arro	_			

C. AMICO							
Name and Signature   Date		Head of Office	Name and Signature   Date				
Prepared by:	Seph Ong	Noted by:	Seph Ong				



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D. Assisting Unit (To be filled out by the personnel or department providing technical assistance.)						
CPMSD for property and e	TMDD for computer hai	dware and software	Other (specify):			
Received by:				- 1		
ŕ	Name and Signature   Dat	2	_			
All goods and services stated in section B of this form are in good working condition.  Remarks (specify):						
Technical Staff	Name and Signature   Date	Head of Office	Name and Signature	Date		
Checked by:		Noted by:				
checked by:		Noted by:				
<ul> <li>E. Unit Accountable</li> <li>All goods and services stated in section B are complete and in good condition.</li> <li>By signing this form, the unit agrees to the following: <ol> <li>We are responsible for the property and equipment issued to our unit.</li> <li>We will use it properly in the manner intended for. Therefore, we will be responsible for any damage done or lost due to our negligence at our expense.</li> </ol> </li> </ul>						
Head of Office		and Signature		Date		
Acknowledged by:   Note: Please return this form immediately to the Asset Management and Inventory Control Office upon accomplishment to comply with the terms of agreement of SLU and the Supplier/Service Provider (refer to the Purchase Order) and avoid losses from						
discounts an	d surcharges due to delay of payment. Thank	you!				
F. Finance Office						
This form will be used as a requirement to process the payment of the purchased goods and services or record adjustments.						
				Date		
Received Copy by:	IVallic	. and signature		Date		
• Notes						