# MATERIAL INSPECTION AND RECEIVING REPORT

| 1. PROC. INSTRUMENT IDEN. (CONTRACT) | (ORDER) NO. | 6. INVOICE NO./DATE | 7. PAGE | OF | 8. ACCEPTANCE POINT |
|---|---|---|---|---|---|

| 2. SHIPMENT NO. | 3. DATE SHIPPED | 4. B/L  TCN | 5. DISCOUNT TERMS |
|---|---|---|---|

| 9. PRIME CONTRACTOR          CODE | 10. ADMINISTERED BY          CODE |
|---|---|

| 11. SHIPPED FROM *(If other than 9)*     CODE          FOB: | 12. PAYMENT WILL BE MADE BY          CODE |
|---|---|

| 13. SHIPPED TO          CODE | 14. MARKED FOR          CODE |
|---|---|

| 15. ITEM NO. | 16. STOCK/PART NO.                              DESCRIPTION *(Indicate number of shipping containers - type of container - container number.)* | 17. QUANTITY SHIP/REC'D* | 18. UNIT | 19. UNIT PRICE | 20. AMOUNT |
|---|---|---|---|---|---|
| | | | | | |

**21. CONTRACT QUALITY ASSURANCE**

**A. ORIGIN**

☐ CQA  ☐ ACCEPTANCE of listed items has been made by me or under my supervision and they conform to contract, except as noted herein or on supporting documents.

_____ DATE   SIGNATURE OF AUTH GOVT REP

TYPED NAME AND OFFICE

**B. DESTINATION**

☐ CQA  ☐ ACCEPTANCE of listed items has been made by me or under my supervision and they conform to contract, except as noted herein or on supporting documents.

_____ DATE   SIGNATURE OF AUTH GOVT REP

TYPED NAME AND TITLE

**22. RECEIVER'S USE**

Quantities shown in column 17 were received in apparent good condition except as noted.

DATE RECEIVED     SIGNATURE OF AUTH GOVT REP

TYPED NAME AND OFFICE

*\* If quantity received by the Government is the same as quantity shipped, indicate by ( ✓/mark; if different, enter actual quantity received below quantity shipped and encircle.*

23. CONTRACTOR USE ONLY