RECEIVING REPORT

IMPORTANT:

- This form must be received in the payment office within 5 workdays of acceptance.
- Acceptance must take place within 7 calendar days of delivery or completion of work unless a different inspection/acceptance period is stated in the contract. (If acceptance is longer than period stated in contract, explain in Block 11.)
- Invoices received must be time stamped to indicate the date of receipt.

SECTION I - CONTRACT IDENTIFICATION

1. NAME OF CONTRACTOR	2. FUND

3. ACT NUMBER	4. MULTIPLE DISTRIBUTION LINE (MDL) NUMBER)	5. CONTRACT/PURCHASE ORDER NO.	6. LEASE NO.

SECTION II - DESCRIPTION OF GOODS AND/OR SERVICES

7A. ITEM NO.	7B. DESCRIPTION *(For services, also give dates of service)*	7C. QUANTITY

8. MAXIMUM PAYMENT AMOUNT	$		11. REMARKS
9. LESS DEDUCTION(S) FOR NONPERFORMANCE, ETC. *(Explain in Item 11, "REMARKS")*	$		
10. MAXIMUM AMOUNT APPROVED FOR PAYMENT *(Item 8 less Item 9)*	$		

SECTION III - CERTIFICATION(S)

12. TYPE OF DELIVERY *(Mark "X" in appropriate box)*

☐ A. FULL ☐ B. PARTIAL ☐ C. FINAL PARTIAL

13. CERTIFICATION		14. SECOND CERTIFICATION *(Optional)*	
I CERTIFY THAT THE ABOVE GOODS AND/OR SERVICES HAVE BEEN RECEIVED ON _____ *(Date)* AND ACCEPTED ON _____ *(Date)*.		THIS IS TO CERTIFY THAT THE GOOD AND/OR SERVICES DESCRIBED HAVE BEEN ACCEPTED.	
A. NAME AND TITLE *(Type, print or stamp)*		A. NAME AND TITLE *(Type, print or stamp)*	
B. CORRESPONDENCE SYMBOL	C. TELEPHONE NUMBER	B. CORRESPONDENCE SYMBOL	C. TELEPHONE NUMBER
D. SIGNATURE	E. DATE SIGNED	D. SIGNATURE	E. DATE SIGNED