Georgia Perimeter College

Partial Receiving Report

VENDOR NAME _____

PAYMENT ADDRESS _____

_____

_____

PURCHASE ORDER NO.

_____

DEPARTMENT

_____

PO Line Number	Invoice Number	Quantity	Description

Received by: _____

Received on: _____

Extension: _____

FOR ACCOUNTING PURPOSES ONLY:

VID _____

GRP _____

VCH _____

FINAL _____

OPR _____

APR _____

COMMENTS: