Contractor Logo	Contractor Name Project Name	Form No. : FM-QMP-0016 Rev. No. : A Page No. :
	MATERIAL RECEIVING REPORT	Only one (1) Purchase Order to be entered on this form

MRR No. :	DATE RCV'D :	SHIPMENT No. :	TRUCK/VESSEL No. :
P.O. No. :	SUPPLIER :	CARRIER :	STORE NO. :
TYPE :	PO-REV-NO :	CERT-NO :	DELIVERY POINT :
O.S & D No. :	O.S & D DATE :	PACKING LIST No. :	

P.O ITEM	MATERIAL CODE		MATERIAL DESCRIPTION	UNIT	QUANTITY					Q.C STATUS	LOCATION	REMARKS
	Code	Size			SHIPPED	RECEIVED		SHORT/ OVER	UNSATIS-FACTORY			
						GOOD	DAMAGE					

DISTRIBUTION : **FIELD QUALITY COORDINATOR :**	**PREPARED & SIGNED BY :** **Contractor W/H SUPVR/ STOREKEEPER:**	**REVIEWED/APPROVED BY :** **Contractor WAREHOUSE SUPERINTENDENT/ SENIOR STOREKEEPER:**	**Q.C. CHECKED :** **SIGNATURE :**	**CONFIRMED BY :** **Company/Consultant FIELD MATERIAL MANAGER:**
*** Q.C. STATUS** **C : Conformant** **NV : Not Verified** **NC : Not Conformant**	DATE :	DATE :	DATE :	DATE :