PARTIAL RECEIVING / PROPERTY CONTROL REPORT

PAGE ____ OF ____

BROWARD COMMUNITY COLLEGE

CHANGE ORDER NO. / AMENDMENT NO.	REQUEST NO.	REQUEST DATE
SHIPMENT STATUS ❒ COMPLETE ❒ PARTIAL ❒ OVERAGE ❒ SHORTAGE	PAYMENT STATUS ❒ PAY ❒ HOLD	THIS NUMBER MUST APPEAR ON ALL CORRESPONDENCE, SHIPMENTS AND INVOICES. PURCHASE ORDER NO.	PURCHASE ORDER DATE
DELIVERING CARRIER	DELIVERY CHARGES $ ❒ PREPAID ❒ COLLECT	WAYBILL NO.	INVOICE NO.	RECEIVING DATE

VENDOR

COST CENTER NAME & NO.

IF ABOVE ADDRESS IS CENTRAL RECEIVING, DISTRIBUTE TO

CAMPUS NO. ____ BLDG. NO. ____ ROOM NO. ____ EXT. NO. ____

PLEASE SHIP THE FOLLOWING SUBJECT TO CONDITIONS PRINTED ON THIS ORDER

ITEM	QUANTITY ORDERED	UNIT	DESCRIPTION / EXCEPTION REMARKS	QUANTITY RECEIVED

PROPERTY CONTROL

ITEM	ASSET NO.	ACCOUNT	BLDG.NO.	ROOM NO.	SERIAL NO.

BY _____ MATERIAL SERVICES SIGNATURE

BY _____ AUTHORIZED DEPARTMENT SIGNATURE

AUTHORIZATION DATE

WHITE: 1 CENTRAL RECEIVING **YELLOW:** 2 ACCOUNTING **PINK:** 3 REQUESTING UNIT **GOLD:** 4 PURCHASING

MAS-1 (4-97)