



# GOOD RECEIVING PRACTICES



**INSPECT DELIVERIES FOR SIGNS OF DAMAGE**



**CHECK AND RECORD TEMPERATURES**

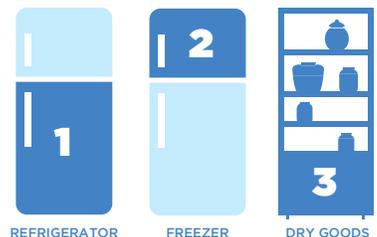
**REJECT UNACCEPTABLE ITEMS AND NOTE ON INVOICE**

**RECORD DELIVERY DATES**

**COMPARE DELIVERED PRODUCTS TO INVOICE**



**PUT PRODUCTS AWAY IN THIS ORDER:**



**SCHEDULE DELIVERIES DURING OPERATIONAL HOURS AND POST SCHEDULE**

SCHEDULE	
Name:	_____
Date:	_____
Time:	_____



**KEEP RECEIVING AREA WELL LIT**

**KEEP RECEIVING AREA CLEAN**

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