Dear Requester:

The following categories require inspection: Information Technology/Furniture/Hazardous Materials. Please complete the below instructions:

Vendor Name: __________________________________________________________________________

P.O. # ______________________________________________________________________________

Inspection Instructions:

a. Open box.
b. Verify items are as ordered (Check PO for quantity and specifications).
c. If applicable, verify items are in working order and undamaged.
d. If goods received do not meet the above criteria, please contact both the Accounts Payable (AP@ccny.cuny.edu) and Purchasing (Purchasing@ccny.cuny.edu) departments.

<table>
<thead>
<tr>
<th>Description</th>
<th>Price</th>
<th>Quantity</th>
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Acknowledgement and Authorization:

My signature below indicates that I have performed the above inspection as required by CUNY Policy and authorize Property Management to enter the inspection in CUNYfirst for these items.

Print Name: __________________________________________________________________________

Division/Department: __________________________________________________________________

.....................................................................................................................

Signature Date

Forward completed forms to Property Management, MR 024B

Revision Date: 10/2013