

DELIVERABLES ACCEPTANCE FORM
TIPSS-4 INSPECTION, ACCEPTANCE & RECEIVING REPORT
CONTRACTOR NAME
TIPSS-4 CONTRACT NUMBER
TASK ORDER NUMBER

Department of the Treasury
Internal Revenue Service (or Bureau Name)
Name & Address of Recipient (COTR)

Date Delivered: MM/DD/YYYY

Task Order Deliverable No.	Description	Quantity	Location Delivered (if different from above)	Date Accepted

All the requirements have been received, inspected and accepted by me, the COTR, and meet the terms of the contract except as noted below: *(List the requirements that were not accepted and/or not delivered and state the reason why)*