

SUPPLY INVENTORY

Retail Location: _____

Date: ____ / ____ /20 ____
Audited By: _____

ITEM DESCRIPTION	CATEGORY	IN STOCK	MIN LEVEL	ORDER NOTES
Thermal Receipt Paper (80mm)	POS		10 Rolls	
Shopping Bags (Large)	Packaging		1 Case	
Pricing Gun Labels (White)	Admin		5 Rolls	
Tissue Paper (Acid Free)	Packaging		2 Packs	
Bubble Wrap Roll	Shipping		1 Roll	

ITEM DESCRIPTION

CATEGORY

**IN
STOCK**

**MIN
LEVEL**

ORDER NOTES

Manager Signature
Inventory Lead
Next Audit Date