

INVENTORY INVOICE

Store Name: _____

Date: _____

Invoice #: _____

Supplier / Donor Information:

Received By:

Inventory Type:

☐ Donation ☐ Consignment ☐ Wholesale

Qty	Item Description / Category	Condition	Unit Price	Total

Subtotal: _____

Tax: _____

GRAND TOTAL: _____

Notes: _____

Authorized Signature: _____ **Date:** _____