BOUTIQUE INVENTORY

Resale & Consignment

INVOICE # _____

DATE: _____

VENDOR / CONSIGNOR:

Name: _____
ID: _____
Phone: _____

DESTINATION:

Store Location: _____
Received By: _____

SKU/Item #	Description (Brand/Size/Color)	Condition	Qty	Unit Price	Total

Subtotal: $ _____
Processing Fee: $ _____

TOTAL VALUE: $ _____

Notes: _____

All items are inspected for authenticity and condition prior to acceptance.