

THRIFT STORE

Supply Order & Inventory Invoice

INVOICE #
DATE

VENDOR INFORMATION
STORE LOCATION / DEPARTMENT
REQUESTED BY

Item ID	Description (Pricing Tags, Hangers, Cleaning, etc.)	Qty	Unit Price	Total

Subtotal: \$ _____
Shipping/Tax: \$ _____
TOTAL: \$ _____

MANAGER APPROVAL SIGNATURE
INVENTORY RECEIVED DATE

* Ensure all retail supplies are logged into the stockroom ledger upon arrival.