Counted By:

Inventory Time:
Inventory Date:

Starting Inventory Value:	Purchases	Ending Inventory Value:	Food & Beverage Sales
		$0.00	

Usage	0
Food Cost %	

Signatures *_____
*_____
(*I fully participated in this inventory that all information & figures are true & accurate)

Sort Code	Storage Area	Item Name (Need Help?)	Inventory U.O.M.	Inventory Unit Cost	Inventory Count	Extension
				Inventory Value		$0.00