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