INVENTORY SHEET

NAME:_____SELLER#_____

ADDRESS:_____

CITY, STATE, ZIP:_____

HOME PHONE:_____CELL PHONE:_____

DO YOU WANT TO DONATE YOUR UNSOLD GARMENTS?

YES_____NO_____ If someone else will be picking up your items: name_____ cell#_____

ITEM #	Item	COLOR	SIZE	PRICE
1	EXAMPLE: GIRLS SKORT	KHAKI	8	$10.00