HANNAH'S BOUTIQUE – INVENTORY FORM

One Original and One Copy of This Form is REQUIRED

(Bring Both to Check-In on Friday, April 28, 2017)

NAME or INITIALS

On TAGS

_____

NAME:_____

ADDRESS:_____

Telephone No:_____

E-MAIL:_____

Price	Qty	Item Description	Rec'd	Ret'd	Sold

Seller Acceptance…sign-in_____ Checker_____

Seller Acceptance…sign-out_____ Checker_____

Checks will be made out to above name, unless otherwise listed:_____

If pick-up is by other than named above, please list:_____