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Division of Food, Nutrition and Wellness

**SFSP NON-FOOD INVENTORY CONTROL SHEET**

Name of Site/Sponsor: \_\_\_\_\_ On-site Kitchen: \_\_\_\_\_

Central Kitchen: \_\_\_\_\_

Inventory Period: \_\_\_\_\_ to \_\_\_\_\_

Beginning Inventory Amount: \$ \_\_\_\_\_

Non-Food Item	Purchased Unit (case, slv, indiv)	# of Units On Hand	Unit Cost	Total Cost
<b>Example: plastic forks</b>	<b>6 bags/250 per bag \$25.00</b>	<b>1 bag 36 indiv</b>	<b>\$4.17 per bag</b>	<b>\$4.77</b>
Ending Inventory				\$

**This is a permanent source document, and it must be retained for a period of three years following the date of submission of the final claim for reimbursement for the fiscal year.**