

SHIPPING INVENTORY

Date

Department

Delivery Location

Acc. Number

Unit Distribution

Item	Unit#	Quantity	Shipping Date	Unit Cost
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
			Sub Total	0
			Tax 2%	0
			Total	0

Date

Approval Signature