



Name of Child: _____ Date of Inventory: _____

Clothing Items:		Quantity:	Personal Items:		Quantity:
Pants			Purse		
Shorts			Wallet		
Skirts			Brush		
Overalls			Comb		
Shirts/Tops/Pullover Sweaters			Toothbrush		
Cardigan Sweaters			Toothpaste		
Jackets/Coats			Hair Gels		
Dresses			Cleansers		
Bathing Suits			Blow dryer		
Underwear			Curling iron/straighter		
Undershirts			MAKE UP	Mascara	
Bras				Eye Shadow	
Socks/Nylons/Tights				Blush	
Pajamas/Night gowns				Lipstick/gloss	
Robes			SCHOOL ITEMS:	Backpack	
Slippers:				Binder	
Shoes				Paper	
Belts				Pens/Pencils	
Other Clothing Items:				Other:	
INFANT CLOTHING & BELONGINGS:			Books:		
Short/Pants Sets			ELECTRONICS: (TV, Radio, Video Etc)		
Onesies			Serial# _____		
Baby Wipes			Serial # _____		
Diapers			Serial# _____		
Bottles			Video Games (List)		
Formula			CD's:		
Blanket			JEWELRY: (examples: Yellow metal necklace, white metal necklace, white stone ring)		
Other:			Earrings:		
Toys: List			Watch: Brand _____		
			Rings:		
			Bracelets		
			Necklace:		
			Other:		
			Cash	Dollars: _____	\$
				Change _____	.

Minor's Signature: I, _____, agree with this inventory. Date: _____

FP Signature: I, _____, agree with this inventory. Date: _____

SW Signature: I, _____, agree with this inventory. Date: _____