



# BROWN SVILLE INDEPENDENT SCHOOL DISTRICT

FORM M

## INVENTORY RECAP

Campus/Organization: \_\_\_\_\_

Date \_\_\_\_\_

Fundraising Project : \_\_\_\_\_

Vendor's Name: \_\_\_\_\_

Sponsor: \_\_\_\_\_

Quantity	Description	Item Cost	Invoice Total	Quantity Sold	Sales Price	Total Sales	Cost of Items Sold	Profit	Ending Inventory	Cost of Inventory

ATTACH TO FORM A