

CLOTHING INVENTORY

CLIENT:		DOA:				
ADMISSION:		TRANSFE	R OF PLACEMENT:	DATE OF Transfer		
ITEM	HAS? YES/NO	#	CONDITION	NEED? YES/NO	# NEEDED	SIZE
COAT						
JACKET						
DRESS SHOES						
ATHLETIC						
SHOES						
JEANS						
DRESS PANTS						
DRESS SHIRTS						
SWEATERS						
SWEAT SHIRT						
T-SHIRT						
SHORTS						
SCHOOL						
PANTS						
SCHOOL						
SHIRTS						
SOCKS						
UNDEARWARE						
LONG JOHNS						
PJ'S						
BATHROBE						
BELTS						
WINTER HAT						
GLOVES						
TIES						
ACCESSORIES						
OTHER						
Client Signature: Date:						
Staff Signature:Date:						