

Inventory

Please fill out inventory for all present vans. Print out current stocking levels before starting this process. Inventory should be done starting at 1:45 PM before shift change.

Date _____

Van # _____

Put "X" for missing item(s) and a "+" mark for any duplicate item(s). Use "✓" for any item(s) accounted for.

- | | |
|---|---|
| <input type="checkbox"/> Air Pump | <input type="checkbox"/> Grappling hook |
| <input type="checkbox"/> Air Pump Battery | <input type="checkbox"/> Magnet |
| <input type="checkbox"/> Air Pump Power Adaptor | <input type="checkbox"/> Paper Towel |
| <input type="checkbox"/> Battery Pack | <input type="checkbox"/> Phone |
| <input type="checkbox"/> Charger Cable | <input type="checkbox"/> Tape (Clear) |
| <input type="checkbox"/> Denatured Alcohol | <input type="checkbox"/> Tape (Masking) |
| <input type="checkbox"/> Flashlight | |

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| <input type="checkbox"/> Air Pump Power Adaptor | <input type="checkbox"/> Paper Towel |
| <input type="checkbox"/> Battery Pack | <input type="checkbox"/> Phone |
| <input type="checkbox"/> Charger Cable | <input type="checkbox"/> Tape (Clear) |
| <input type="checkbox"/> Denatured Alcohol | <input type="checkbox"/> Tape (Masking) |
| <input type="checkbox"/> Flashlight | |

Denver Ops Office

Put down the quantities of items that are present in the operations office as back stock. If there are none, put "N/A" or "X".

- | | |
|---|---|
| <input type="checkbox"/> ___ Air Pump | <input type="checkbox"/> ___ Grappling hook |
| <input type="checkbox"/> ___ Air Pump Battery | <input type="checkbox"/> ___ Ice Scraper |
| <input type="checkbox"/> ___ Air Pump Power Adaptor | <input type="checkbox"/> ___ Jumper Cables |
| <input type="checkbox"/> ___ Battery Pack | <input type="checkbox"/> ___ Magnet |
| <input type="checkbox"/> ___ Bolt Cutters | <input type="checkbox"/> ___ Paper Towel |
| <input type="checkbox"/> ___ Charger Cable | <input type="checkbox"/> ___ Phone |
| <input type="checkbox"/> ___ Denatured Alcohol | <input type="checkbox"/> ___ Tape (Clear) |
| <input type="checkbox"/> ___ Flashlight | <input type="checkbox"/> ___ Tape (Masking) |

Notes:
