DIXANI - STOCK COUNT SHEET

Company / Business: _____	**Warehouse / Location:** _____	**Count Date:** _____
Count Type: Full / Cycle / Spot / Blind	**Counted By:** _____	**Verified By:** _____

#	SKU / Item Code	Description	Category	Location / Bin	UOM	Physical Qty	Recount Qty	Remarks
1								
2								
3								
4								
5								
6								
7								
8								
9								
10								
11								
12								
13								
14								
15								
16								
17								
18								

#	SKU / Item Code	Description	Category	Location / Bin	UOM	Physical Qty	Recount Qty	Remarks
19								
20								

Counted By / Signature	Verified By / Signature	Date / Time