

Complete the top copy cut in 1/2 securely tape to the top of container then complete the lower portion, lightly tape it to the container so it can easily be removed for our inventory records

PERU - Family to Family INVENTORY FORM

St. Anthony F2F # _____ Your Last Name: _____

Check in NEW or USED box (only items in container)

NEW USED

Clothing	Ropa		
Shoes	Zapatos		
Toiletries	Articulos de tocador		
Household Items	Atriculos para el hogar		
Kitchen Items	Articulos de cocina		
Tools	Herramientas		
Toys/Games	Juguetes/Juegos		
Linens/Towels	Ropa de cama		
School Supplies/Books	Utiles escolares y libros		
Religious Items	Cosas religiosas		
Food Items	Alimentos		
Over the Counter Medicine	El medicamento que no requiere receta medica		
Other	Otra Cosas		

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