# Macon County Board of Education
## CONCESSION INVENTORY

School _____

Month _____

Week _____

Event: _____

| Item Description | Store Price | Quantity (How many in Package, box, or bags) | Price of each (if a box divide Price by how many items in box) EX. $32/30=1.00 | School Sell Price | How many remaining | Total Sold | Total funds Collected |
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| | | | | Total Expected Profit | | | |

Print Name _____ Signature: _____

Print Name _____ Signature _____

Please Attached Detailed Receipt of items purchased to this form

School Store Inventory must be completed weekly

Game Concession Monthly

FORM K 8/3/22

MCBOE 22-0001

| Office Use Only | | | | | |
|---|---|---|---|---|---|
| Master Receipt # | Date of Receipt | Amount | GL Fund Source | Is Receipt Attached? | Is Inventory Purchase |
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**FORM K** **8/3/22**
**MCBOE** **22-0001**