

RePlay Toys: New In Box Inventory Intake Form

Consignor Information

Name: _____
 Number: _____

Start Date _____
 End Date _____

Item	Item Name	Manufacturer	STORE USE ONLY	
			Recall List	RePlay List Price
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				
16				
17				
18				
19				
20				

_____ I will pick up my unsold toys!

_____ Check

_____ Never see my toys again!

_____ RePlay Dollars!

Please initial here to indicate that you will pick up damaged or recalled items within 24 hours of notification.

PRINT PLEASE