ANIMAL HEALTH PRODUCT INVENTORY SHEET

Product Name	Received Date	Quantity Received	Unit / Package	Lot Number	Serial Number	Useable after opening / mixing (Yes/No)	Expiration Date	Disposal comments and date	Employee Initials

Reviewed By:

OPERATION OWNER _____ DATE _____ OPERATION MANAGER _____ DATE _____ VETERINARIAN OF RECORD _____ DATE _____