

Live Goods Write Off Worksheet

Date: _____
Time: _____
Store Name & Number: _____
Vendor Name: Jeffery's Greenhouses _____

Article	Description	UPC	Quantity
1001938845	6" Vigoro Calathea Crimson/Rosie	6-23390-45232-9	
1001938848	6" Vigoro Dracaena Lemon Lime	6-23390-16845-9	
1001938856	6" Vigoro Ficus Burgundy	6-23390-69485-9	
1001938850	6" Vigoro Ficus Shivereana Moonshine	6-23390-16549-6	
1001938852	6" Vigoro Ficus Tineke	6-23390-65432-7	
1001938851	6" Vigoro Ficus Fiddle Leaf Fig	6-23390-59643-6	
1001938858	6" Vigoro Monstera Adansonii	6-23390-68548-2	
1001938861	6" Vigoro Philodendron Ring of Fire	6-23390-98732-6	
1001938862	6" Vigoro Philodendron Pink Princess	6-23390-68546-8	
1001938864	6" Vigoro Philodendron Birkin	6-23390-36984-9	
1000671700	6" Vigoro Assorted	6-23390-78975-3	

VENDOR RESPONSIBILITY: Vendors are responsible for accurately completing all fields of the table above, calling the Manager on Duty, showing them the culled product in Receiving at the compactor and having the MOD sign to acknowledge receipt of this form. VENDORS MUST KEEP A PHOTOCOPY OF THE FORM AFTER IT IS SIGNED BY THE MOD.

VENDOR SIGNATURE: _____

DATE: _____

MOD RESPONSIBILITY: By signing this form, you as a member of the management team are acknowledging receipt of this sheet and responsibility for ensuring that all quantities are ACCURATELY and PROMPTLY entered into myStore Tools as a write-off. Further, you are acknowledging responsibility for ensuring that the culled live goods are disposed of in the compactor immediately after the write-offs are entered. Note the GM number and keep copy of this form with the Goods Movement Report.

GOODS MOVEMENT NUMBER: _____

MOD SIGNATURE: _____

DATE: _____