

Year \_\_\_\_\_

**MONMOUTH COUNTY VOCATIONAL SCHOOL DISTRICT**

**CUSTODIAN MONTHLY INVENTORY CONTROL FORM**

Building \_\_\_\_\_

Month \_\_\_\_\_

| ITEM                 | QUANTITY | REMAINING INVENTORY |
|----------------------|----------|---------------------|
| Ammonia              | quart -  |                     |
| Bleach               | quart -  |                     |
| Cleanser, Powder     | can -    |                     |
| Sweeping Compound    | pounds - |                     |
| Soap, Borated        | pounds - |                     |
| Soap, Lanolin        | pounds - |                     |
| Cleaner, All Purpose | gallon - |                     |
| Trisodium            | pounds - |                     |
| Toilet Tissue        | rolls -  |                     |
| Paper Towels         | rolls -  |                     |
| Wax                  | gallon - |                     |
| Terrazzo Sealer      | gallon - |                     |
| Wax Stripper         | gallon - |                     |
| Bowl Cleaner         | gallon - |                     |
| Absorbent            | pounds - |                     |
| Window Cleaner       | gallon - |                     |

**Note: This form is to be completed at the end of each month and turned in to the Building Principal. Distribution of additional supplies will be based on Remaining Inventory column.**

Date \_\_\_\_\_

Head Custodian \_\_\_\_\_  
Signature

Date \_\_\_\_\_

Principal \_\_\_\_\_  
Signature