

# Warehouse Inventory Movement Slip

Document No: \_\_\_\_\_ Date: \_\_\_\_\_

From (Warehouse/Location):

To (Warehouse/Location):

Reference (Order/Request):

Movement Type:

| No. | Item Code / SKU | Description | UOM | Qty | Remarks |
|-----|-----------------|-------------|-----|-----|---------|
|     |                 |             |     |     |         |
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|     |                 |             |     |     |         |
|     |                 |             |     |     |         |

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Requested / Issued By

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Verified By

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Received By