## Inventory Reconciliation Form

## Instructions:

1. Complete physical count of inventory held for resale.
2. The Preparer completes and signs the sections below.
3. The Department Manager and their supervisor sign the sections below.
4. Send the Signed form to the Associate Director of Accounting.

## Section I. Memorandum

```
The goods held for resale as of August 31,2025 were inventoried by
and on
```

| Department name: |  |
| :--- | :--- |
| DEPTID: | Cost Center: |
| Net dollar value of consumable inventory: $\$$ |  |

My signature below indicates my review and approval of this inventory as an accurate report of the quantities and values of the items held by this department.

| Preparer signature: | Date: |
| :--- | :--- |
| Printed name: | Title: |


| Department Manager signature: | Date: |
| :--- | :--- |
| Printed name: | Title: |


| Supervisor certifying signature: | Date: |
| :--- | :--- |
| Printed name: | Title: |


| Attachments (if applicable) | $\square$ Surplus Receipts |
| :--- | :--- |
|  | $\boxed{\text { Additional Obsolete Inventory Adjustments }}$ |
|  | $\square$ |

## UISA Financial Affairs

## Section II. Obsolete Inventory Adjustments

Complete the fields below for all obsolete inventory disposed of throughout the year. Surplus receipts must be attached.

| Item \# | Description | Quantity | Unit Cost | Value |
| :---: | :---: | :---: | :---: | :---: |
|  |  |  |  | \$ 0.00 |
|  |  |  |  | \$ 0.00 |
|  |  |  |  | \$ 0.00 |
|  |  |  |  | \$ 0.00 |
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|  |  |  |  | \$ 0.00 |
|  |  |  |  | \$ 0.00 |
|  |  |  |  | \$ 0.00 |
| Total Value: |  |  |  | \$ 0.00 |

## Section III. Reconciliation

Complete the fields below. If a variance exists, the Department Manager must provide an explanation in the field provided.

| 1. Beginning Inventory Value |  | A |
| :--- | :--- | :---: |
| 2. Purchases for Resale |  | B |
| 2. a. Inventory Received but not yet paid. |  | C |
| 3. Inventory Consumed |  | D |
| 4. Inventory Disposed (Obsolete) | $\$ 0.00$ | E |
| 5. Projected Inventory Value | $\$ 0.00$ | F (A+B+C-D-E) |
| 6. Actual Inventory Value, August 31, 2025 |  | G |
|  | Variance: | $\$ 0.00$ |

Explanation of Variance:

Submission Instructions: Send the signed form to the Associate Director of Accounting. For more information, see Inventory for Resale: Management Guidelines for Service Centers. For more Information, see https://www.utsa.edu/financialaffairs/resources/financial-guidelines/index.html?id=6.18.1

