

[illegible]

Item	Item Description	Purchase Price/Approx. Value	Quantity	Discharged w/patient? yes/no (if not, why...damaged, discarded, etc.?)

#### SIGNATURES REQUIRED AT ADMISSION

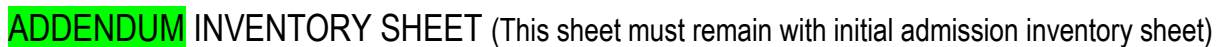
Resident/Guardian Signature:	
Resident Name Printed:	Date: ____/____/____

Staff Signature:	
Staff Name Printed:	Date: ____/____/____

#### SIGNATURES REQUIRED AT DISCHARGE

Resident/Guardian Signature:	
Resident Name Printed:	Date: ____/____/____

Staff Signature:	
Staff Name Printed:	Date: ____/____/____

[illegible]

Item	Item Description	Purchase Price/Approx. Value	Quantity	Discharged w/patient? yes/no (if not, why...damaged, discarded, etc.?)

**SIGNATURES REQUIRED AT ADDENDUM**

Resident/Guardian Signature: Resident Name Printed:	Date: ____/____/____
--	----------------------

Staff Signature: Staff Name Printed:	Date: ____/____/____
---	----------------------

**\*SIGNATURES REQUIRED AT DISCHARGE**

Resident/Guardian Signature: Resident Name Printed:	Date: ____/____/____
--	----------------------

Staff Signature: Staff Name Printed:	Date: ____/____/____
---	----------------------