

# WIN Family Services Inc.

2502 W. Northern Parkway Baltimore, Maryland 21215\* (410) 578-8003 office\* (410) 578-0881 (fax)

## CLOTHING INVENTORY

A clothing inventory should be completed at intake, every transition and by the 15th of Feb., May, Aug., and Nov. months. On the spaces provided write the number of clothing articles counted for each item. The treatment parent, youth and WIN staff member must sign at the bottom of this form.

The numbers next to each clothing article represent the minimum requirement of items in that specific category.

Attach a copy of the most recent clothing receipts to the back of this form.

Date: \_\_\_\_\_

Client Name: \_\_\_\_\_

### UNDERGARMENTS

BRAS (5) \_\_\_\_\_ UNDERPANTS (7) \_\_\_\_\_ UNDERSHIRTS (7) \_\_\_\_\_ SOCKS (7) \_\_\_\_\_

### SHOES

SCHOOL/WORK SHOES (1) \_\_\_\_\_ DRESS SHOES (1) \_\_\_\_\_ BOOTS (1) \_\_\_\_\_ TENNIS SHOES (1) \_\_\_\_\_

### OUTERWEAR

WINTER COAT (1) \_\_\_\_\_ JACKET (1) \_\_\_\_\_ SWEATSHIRTS (1) \_\_\_\_\_ BLOUSES (2) \_\_\_\_\_

LONG SLEEVE SHIRTS (5) \_\_\_\_\_ SKIRTS (3) \_\_\_\_\_ WORK UNIFORM (2) \_\_\_\_\_ PANTS (5) \_\_\_\_\_

SHORT SLEEVE SHIRTS (5) \_\_\_\_\_ SHORTS (5) \_\_\_\_\_ DRESSES (2) \_\_\_\_\_ JEANS (3) \_\_\_\_\_

SWEATERS (3) \_\_\_\_\_ SUITS (1) \_\_\_\_\_ OTHER \_\_\_\_\_

### MISCELLANEOUS

BELTS (1) \_\_\_\_\_ GLOVES (1) \_\_\_\_\_ HAT (1) \_\_\_\_\_ SCARVES (1) \_\_\_\_\_

### PLEASE ANSWER YES OR NO:

Does the child have a winter coat? \_\_\_\_\_ Adequate school uniforms/attire? \_\_\_\_\_ Have you included receipts? \_\_\_\_\_

Adequate baby supplies? \_\_\_\_\_ Adequate seasonal clothing? \_\_\_\_\_

**How long has the youth been in your care, what are the clothing needs for this youth, what is the anticipated date of obtaining necessary clothing, what is the youth's clothing & shoe size and any additional comments?**

Signature of Youth & Date \_\_\_\_\_

Signature of Treatment Parent & Date \_\_\_\_\_

Signature of Referring Staff & Date \_\_\_\_\_

Signature of WIN Staff & Date \_\_\_\_\_

Please note tht by signing this form, you are confirming that all information on this form is correct to the best of your knowledge.