[ORGANISATION NAME]
[Address] [Phone] [Email]

Retail Stockroom Shift Handover

Store / stockroom: _____ Shift / date: _____

Outgoing lead: _____ Incoming lead: _____

Stock / delivery task	Status / quantity	Next action	Owner / due

Stock controls

Unprocessed receipts / returns / reservations: _____

Discrepancies / damaged stock / isolation location: _____

Shift acceptance

Equipment or keys transferred: _____

Both supervisors / signatures / time: _____