



MARILYN TODD INSURANCE

Home Inventory Checklist

Bedroom #4

Item Name	Purchase Date	Purchase Price	Brand	Model/Serial #	Qty.

Date: _____



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Bedroom #5

Item Name	Purchase Date	Purchase Price	Brand	Model/Serial #	Qty.

Date: _____



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Bathroom #1

Item Name	Purchase Date	Purchase Price	Brand	Model/Serial #	Qty.

Date: _____



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Bathroom #2

Item Name	Purchase Date	Purchase Price	Brand	Model/Serial #	Qty.

Date: _____

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Bathroom #3

Item Name	Purchase Date	Purchase Price	Brand	Model/Serial #	Qty.

Date: _____



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Item Name	Purchase Date	Purchase Price	Brand	Model/Serial #	Qty.

Date: _____

