

QUARTERLY PHYSICAL INVENTORY

Instructions:

- Due by the 5th of the following months: January, April, July, October.
- Mail original completed form: Department of Motor Vehicles, Occupational Licensing Section, Attn: Control Cashier, P. O. Box 932342, Mail Station L224, Sacramento, CA 94232-3420.
- Retain copy for your records.

VESSEL AGENT NAME					VESSEL AGENT NUMBER			
VESSEL AGENT ADDRESS			CITY		STATE		ZIP CODE	
VESSEL AGENT TELEPHONE ()								

RECEIPTS				VESSEL STICKERS					
BOAT 102 (NEW BOATS)	PERMANENT VESSEL NUMBER AND TEMPORARY CERTIFICATE OF NUMBER			BOAT 104	VESSEL STICKER				
	BEGINNING	ENDING	ON-HAND		BEGINNING	ENDING	ON-HAND		
Total Issued for Quarter		Total on Hand		Total Issued for Quarter		Total on Hand			
BOAT 103 (USED BOATS)	MISCELLANEOUS RECEIPT AND TEMPORARY CERTIFICATE OF NUMBER			BOAT 105	MUSSEL FEE STICKER				
	BEGINNING	ENDING	ON-HAND		BEGINNING	ENDING	ON-HAND		
Total Issued for Quarter		Total on Hand		Total Issued for Quarter		Total on Hand			
				VOID RECEIPTS					
				FOR HEADQUARTERS USE ONLY					
Total Issued for Quarter		Total on Hand		Total Issued for Quarter		Total on Hand			

OFFICE			QUARTER ENDING DATE		
AUTHORIZED SIGNATURE		PRINTED NAME OF AUTHORIZED PERSON		DATE	
X					