# INVENTORY WORKSHEET

CHEMICAL INVENTORY

Name of School: _____ Date(s) of Inventory: _____

Persons Conducting Inventory: _____

| Full Name of Substance | CAS No. | Manufacturer | Container | | Expiration date or approximate age of substance | Storage situation and Location | Chemical Family | Hazard Identification | Store or Dispose? |
|---|---|---|---|---|---|---|---|---|---|
| | | | Size | Type (metal, glass, etc.) | | | | | |
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