Name of the village							Name of the product:						
Health Center:													
District:													
Province:													
Date	Received		Rece	eived	Expired date		Issued		Balanc	Balance		Other	
	from/0	Going to									observ	ations	
Previous balance													
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Issued to patient	Jan	Feb	Marc	April	May	June	July	Aug	Sept	Oct	Nov	Dec	
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