TITLE OF FORM:	
Number of pages:	Procedure Number
Prepared by: Date: Designation	Approved by: Date: Designation

THE STOCK CONTROL CARD

CARD NUMBER: 03

Item Description and dosage form: *Paracetamol Tablets*				**Special Conditions** *N/A*		
Strength/Size: *500mg*				**AMC** (Average Monthly Consumption)**:** *125*	**MSL** (Maximum Stock Level): *375*	
Unit of issue *Bottle/1000 tablets*	**Reorder Level:** *250*					**Item Code:** *24/6524*
Date	**Received From**	**Quantity Received**	**Quantity Out**	**Issued To**	**Balance on Hand**	**Remarks &Signature**
2/09/07	CMS	100	INV 2367	EXP 06/2011	325	ETC

Review Date:					
Date Reviewed:					
Signature:					