Vaccine and Logistic Issue Voucher

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Supply Voucher No.: Date of Issue :					Sup	Supply Voucher No.: Date of Issue :							Supply Voucher No.: Date of Issue :								
Reference Indent No Date of Indent Received :				Ref	Reference Indent No			Date of Indent Received :					ference Indent No	Date of Indent Received :							
To:						To:								To:	:						
Item Amo		o. Expiry Date	VVM Status	Freezing Status	Remarks		Item	Amount Released	Batch No.	Expiry Date	VVM Status	Freezing Status	Remarks		Item	Amount Released	Batch No.	Expiry Date	VVM Status	Freezing Status	Remarks
1 BCG (doses)						1	BCG (doses)							1	BCG (doses)						
2 bOPV (doses)						2	bOPV (doses)							2	bOPV (doses)						
3 DPT (doses)						3	DPT (doses)							3	DPT (doses)						
4 Hep B (doses)						4	Hep B (doses)							4	Hep B (doses)						
5 Pentavalent(doses)						5	Pentavalent(dose	s)						5	Pentavalent(doses	s)					
6 IPV (doses)						6	IPV (doses)							6	IPV (doses)						
7 Measles (doses)						7	Measles (doses)							7	Measles (doses)						
8 JE (doses)						8	JE (doses)							8	JE (doses)						
9 TT (doses)						9	TT (doses)							9	TT (doses)						
10 RVV (doses)						10	RVV (doses)							10	RVV (doses)						
11 BCG Diluent						11	BCG Diluent							11	BCG Diluent						
12 JE Diluent						12	JE Diluent							12	JE Diluent						
13 Measles Diluent						13	Measles Diluent							13	Measles Diluent						
14 0.1ml AD Syringes (Pcs)						14	0.1ml AD Syringes (Pcs)							14	0.1ml AD Syringes (Pcs)						
15 0.5 ml AD Syringes (Pcs)						15	0.5 ml AD Syringes (Pcs)							15	0.5 ml AD Syringes (Pcs)						
16 5 ml Disp. Syringes (Pcs)						16	5 ml Disp. Syringes (Pcs)							16	5 ml Disp. Syringes (Pcs)						
17 VitA Syrup						17	VitA Syrup							17	VitA Syrup						
Received above vaccines ar	d logistics in qua	ntity mentioned	and in good	d condition.		Red	ceived above vacc	ines and logi	stics in quant	ty mentioned a	and in good	condition.		Re	ceived above vacci	nes and logis	tics in quanti	ty mentioned a	and in good	condition.	
Signature of Store in Charges					s	Signature of Store in Charge: Signature of Receiver:								Signature of Store in Charge: Signature of Receiver:							

Name:

Designation:

Name:

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Name:

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Signature of Store in Charge:

Name:

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