	STOCK CARD												
Programme:											Location of Store:		
Donor:											Stock Card No:		
Stock Item:				Stock Code:			Location of Item Within Store:						
Form of Item (tablet etc.):				Unit (no of items per pack):				Pack (Box, Bottle etc.)		Dosage (Strength o	osage (Strength of Drug):		
Re-order Level:													
	ITEM INFOR	MATION	G	OODS IN - ORIGI	- ORIGIN		GOODS OUT - DESTINATION					BALANCE	
DATE	Expiry Date (food/ drugs)	Batch No. (drugs)	No. of Units Coming In	Internal Order Number	GRN/Waybill Number	Source	No. of Units Going Out	Internal Requisition No.	Waybill No.	Destination	SIGNATURE RECIPIENT	BALANCE	SIGNATURE STORE MANAGER
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											Balance carried forward:		Page