Veterinary Medicines - Purchase Record

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| --- | --- | --- | --- | --- | --- | --- |
| **Date of purchase/ acquisition** | **Name & address of supplier of veterinary medicine** | **Name of Product** | **Quantity** | **Batch number** | **Withdrawal period** | **Date, quantity & route of disposal if not administered** |
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Veterinary Medicines – Administration Record

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| **Date of Administration** | **Name of veterinary****medicinal product** | **Batch****No.** | **Identification of the animals****treated** | **Qty****Administered** | **Date treatment finished** | **Date withdrawal period ended****Meat / Milk** | **Reason****for treatment** | **Name of person who administered medicine** |
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