NOOTAN PHARMACEUTICALS QUALITY CONTROL DEPARTMENT (RAW MATERIAL)

Name of the Ray	w Material:
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Batch No. :

Mfg. Date :

Exp. Date :

Mfg. by :

Supplied by :

Qty: Received:

G.R.N. No. :

Sampled by :

Sample Qty. :

Sampling Date :

Sign of Chemist: