

CHW Combined Stock Activity Report Form 2

[Scenario: CHW records consumption, e.g., on stock card or consumption record]

| | |
|-----------------------------------|--|
| CHW Name: | Max Stock Level (A): ___ (Months) |
| Supplying Health Facility: | District: |
| Reporting Period: | Date Completed: |

Completed by CHW

| Product Description B | Counting Unit C | Quantity Dispensed D | Ending Balance E |
|---------------------------------|---------------------------|--------------------------------|----------------------------|
| amoxicillin 250 mg dispersible | tablet | | |
| | | | |
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| | | | |
| | | | |

Completed by Supplying Health Facility

| Quantity Needed to Reach Max ((D x A) – E) F | Quantity Supplied G |
|--|-------------------------------|
| | |
| | |
| | |
| | |
| | |

| | Name | Title | Date | Signature |
|--------------------------|-------------|--------------|-------------|------------------|
| Prepared by (CHW) | | | | |
| Issued by (HC) | | | | |
| Received by (CHW) | | | | |