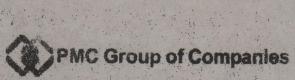
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Company of the State of the Sta	AL PROJECT RE		CONTROL NO.:
	ES POSITION:	MILLAPEZ Tomsion:	DATE REGILES TED: DATE NEEDED: MAY 5, 202 MAY 15, 202 TERRITORY:
OF WINE FIEN	ROUPIASSOCIATION	SCHEDULE:	BA COLOO EXPECTED ROI:
Department: A ESPIA, Contact Person: MK, BK, Position: CHI EF K	ATORY CARE UNIT ALL DIAMOND MILLIARS ESPIRATORY THERADS	Date: MAY 15, 200 Day: SATUR OAY Time: 7 A M	20,000 00
Pis. Check 8ox Product Demo Pakain Biltz Others Please Specify	Sponsorship Please Specify CIMMER OUTING	PARTICIPANTS: EXPECTED NUMBER OF DOCTORS INVOLVED NURSES INVOLVED PMC INVOLVED	
mer almmer	OF THE PROJECT - PCU DEPT N	OTHERS PLS. SPECIFY TOTAL NUMBER	
the chief for the position	paretationship where the property of the property of the property oducts in their	PROPOSED BURGET. COST PER PAX TOTAL COST	
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AP OFFICER ACCTS MO	OR RELEASED BY RECEIVED BY	DATE	DATE DATE (TO ACCTG)
LIQUIDATED ON:	ACTUM, EXPENSI		O.R. NAME/NUMBER
	ROU	MONITORING	**
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