



Month: \_\_\_\_\_

Year: \_\_\_\_\_

LGA: \_\_\_\_\_

# MSWCD Project Hope & Comfort – Welfare Officer Monthly Report

Officer Name: \_\_\_\_\_

Date: \_\_\_\_\_

*Comment on the status of equipment using the following options:  
Working(W) / Not Working(NW)*

PHC	Computer, Mouse and Keyboard	Solar	Camera	Fingerprint Reader	Printer	No of enrolment forms available	No of free health access forms available	Are you paying for health services?	Number of Enrolment		Number of Free Health Visits	
									U5	PW	U5	PW
Total												

Comments (Any problems, suggestions, issues e.g network):

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