

'FORM 'B'

[See rule 19 (2)]

*Monthly return of spirituous medicinal preparations received and sold during the month of 20 .*Name of the Licence.....
.....
.....

Address

S. M. P. I Licence No.
.....

Name of the spirituous medicinal preparation	Opening balance on the 1st day of the month	Quantity receive during the month	Total [Columns (2) and (3)]	Quantity sold during the month	Closing balance on the last day of the month	Signature of the licence
(1)	(2)	(3)	(4)	(5)	(6)	(7)

1. Ins. by G. N. of 14-7-1962.