## Form no. 3J [See rule 52T(I)]

ESTIMATE OF ANNUAL REQUIRMENT OF ESSENTIAL NARCOTIC DRUGS

Estim	į	:			Date of submitting estimate :				
1.	Number and date of the current certificate of recognition :								
2.	Name of the Recognized Medical Institution								
3.	Details of the estimated annual requirement of essential narcotic drugs								
SI. No.	Name of the essential narcotic drug			Quantity disbursed during previous year	Estimated annual requirement		evised estimanual require		Reason for revision
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Full Name / Designation (if any)

Signature of the overall in charge.