



དཔལ་ལྷན་འབྲུག་གཞུང་། གསོ་བ་ལྷན་ཁག འབྲུག་བཟའ་ཚེས་དང་སློན་རིགས་དབང་འཛིན།

ROYAL GOVERNMENT OF BHUTAN
MINISTRY OF HEALTH
BHUTAN FOOD AND DRUG AUTHORITY
INSPECTION SERVICES



CONSIGNMENT RELEASE FORM

Ref. No.

This consignment is released;

M/s.: _____

Address: _____

Sl.No.	Commodity/Product	Variety/Type	Quantity	Exporting country	Remarks

Date of Release:

Name and seal of Authorized Officer:

NB: The consignment is released upon fulfillment of the import conditions

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