**Vakcīnu pieprasījums ārpus kārtējā pasūtījuma (paraugs)**

Ārstniecības iestādes nosaukums un adrese

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|  |
| Kods http://www.vestnesis.lv/wwwraksti/BILDES/KVADRATS.GIFhttp://www.vestnesis.lv/wwwraksti/BILDES/KVADRATS.GIFhttp://www.vestnesis.lv/wwwraksti/BILDES/KVADRATS.GIFhttp://www.vestnesis.lv/wwwraksti/BILDES/KVADRATS.GIFhttp://www.vestnesis.lv/wwwraksti/BILDES/KVADRATS.GIFhttp://www.vestnesis.lv/wwwraksti/BILDES/KVADRATS.GIFhttp://www.vestnesis.lv/wwwraksti/BILDES/KVADRATS.GIFhttp://www.vestnesis.lv/wwwraksti/BILDES/KVADRATS.GIFhttp://www.vestnesis.lv/wwwraksti/BILDES/KVADRATS.GIF |
|  |
| (ārstniecības personas vārds, uzvārds, tālruņa numurs) |

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| **Nr.p.k.** | **Vakcīnas nosaukums** | **Vakcīnas daudzums (devas)** |
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Pamatojums: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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|  |  |
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| Lūdzu piegādāt vakcīnu/-as līdz | \_\_\_\_. \_\_\_\_. \_\_\_\_\_\_. |
|  | (datums) |
| Ārstniecības iestādes darba laiks | |  |  | | --- | --- | | **Nedēļas diena** | **Darba laiks** | | Pirmdiena |  | | Otrdiena |  | | Trešdiena |  | | Ceturtdiena |  | | Piektdiena |  | |

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| \_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| (datums) |  | (vārds, uzvārds) | (paraksts) |
|  |  |  |  |