

COVID-19 Lateral Flow Test Distribution Service – Transaction Record Sheet

Date of transaction	16-digit Collect code																Anonymous collection	No. of kits supplied (max. 2)	Lot numbers of kits	Entered on MYS
																	<input type="checkbox"/>			<input type="checkbox"/>
																	<input type="checkbox"/>			<input type="checkbox"/>
																	<input type="checkbox"/>			<input type="checkbox"/>
																	<input type="checkbox"/>			<input type="checkbox"/>
																	<input type="checkbox"/>			<input type="checkbox"/>
																	<input type="checkbox"/>			<input type="checkbox"/>
																	<input type="checkbox"/>			<input type="checkbox"/>
																	<input type="checkbox"/>			<input type="checkbox"/>
																	<input type="checkbox"/>			<input type="checkbox"/>
																	<input type="checkbox"/>			<input type="checkbox"/>
																	<input type="checkbox"/>			<input type="checkbox"/>
																	<input type="checkbox"/>			<input type="checkbox"/>
																	<input type="checkbox"/>			<input type="checkbox"/>
																	<input type="checkbox"/>			<input type="checkbox"/>
																	<input type="checkbox"/>			<input type="checkbox"/>
																	<input type="checkbox"/>			<input type="checkbox"/>
																	<input type="checkbox"/>			<input type="checkbox"/>
																	<input type="checkbox"/>			<input type="checkbox"/>

This data must be entered into MYS every week.

Record to be retained until: / / (6 months from the last delivery date)