

Patient Card



KwaZulu Natal Department of Health
Comprehensive Care Programme

Signature _____

South African Identity Number

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

BARCODE

Thumb
Print



KwaZulu Natal Department of Health
Comprehensive Care Programme

Signature _____

South African Identity Number

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

BARCODE

Thumb
Print



KwaZulu Natal Department of Health
Comprehensive Care Programme

Signature _____

South African Identity Number

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

BARCODE

Thumb
Print



KwaZulu Natal Department of Health
Comprehensive Care Programme

Signature _____

South African Identity Number

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

BARCODE

Thumb
Print



KwaZulu Natal Department of Health
Comprehensive Care Programme

Signature _____

South African Identity Number

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

BARCODE

Thumb
Print