Medication Label

**Color:**

[ ]  Green [ ]  Red [ ]  Yellow [ ] Purple

|  |  |
| --- | --- |
| Name of Child: |       |
| Date of Birth(MM/DD/YYYY): |       |
| Site: |       | Classroom: |       |
| Bus Driver: |       |
| Medication Name: |       |
| Expiration Date (MM/DD/YYYY) |       |

Transportation #6 Updated 8/31/2022

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Medication Label

**Color:**

[ ]  Green [ ]  Red [ ]  Yellow [ ] Purple

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Transportation #6 Updated 8/31/2022