

# Hospital Cleaning Chemical Inventory

Chemical Name	Type	Location	Supplier	Batch Number	Expiry Date	Quantity	Unit	Storage Requirements	Notes
<input type="text"/>	<input type="text" value="▼"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text" value="▼"/>	<input type="text"/>	<input type="text"/>