**List of births <2Kg in the study area (ascertain the denominator)**

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| **Nos.** | **ALL BABIES BORN IN STUDY AREAS DURING EVALUATION PERIOD** | | | | | **If date of birth within the evaluation period and birth weight <2kg:** | | |
|  | **Date of filling** | **Name of the mother and father** | **Address of the mother, contact number** | **Date of birth** | **Baby birth weight** | **Where baby was born?**  **11=Home**  **12=Hospital**  **13=Others (transit)** | **If hospital, note the name:** | **Vital status by day 29 after birth**  **11=alive**  **12=dead** |
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