STATEMENT OF ORIGINALITY

The undersigned:

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Student ID	: P17430214074
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hereby declares that the Final Report/Final Project entitled " LEVEL OF KNOWLEDGE AND PERCEPTION ON NON-NATIONAL HEALTH INSURANCE (JKN) PARTICIPANT COMMUNITIES IN THE PRONOJIWO VILLAGE, PRONOJIWO DISTRICT, LUMAJANG REGENCY " is my work, original, and written following the Final Report/Final Project writing guidelines of the Medical Record and Health Information Study Program, Poltekkes Kemenkes Malang.

If at any time it is found that there is a discrepancy with this statement, I am willing to accept the sanctions following the regulations in force at Poltekkes Kemenkes Malang.

Malang, March 22, 2024

Supervisor,

Student,

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