**Controlled Substance Dispensing Record**

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| **DEA Registrant Name** | **DEA Registrant #** | **Controlled Substance** | **Schedule** |
| **Lot #** | **Finished Form & Number of Units** | **Acquired From (Name, Address, DEA#)** | **Date Acquired** |

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| **Dispensed/Transferred to:**  **Name and Address, DEA# if Transfer** | **Date Dispensed** | **Amount Dispensed Units/Volume** | **Recipient Initials** |
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Instructions: Complete one form for each substance in inventory. Maintain in Registrant records. Document must be retained for two years from the last date of activity.