

Controlled Substances Transfer

Date: _____

Former DEA Registrant: _____

Former DEA Registration#: _____

DEA Registrant: _____

DEA Registration #: _____

Transfer performed by:

Print Name

Signature

Controlled Substance	Lab Ref #	Concentration or Strength	Inventory Total ml or mg Opened	Inventory Total ml or mg Unopened	Initials

Controlled Substance	Lab Ref #	Concentration or Strength	Inventory Total ml or mg Opened	Inventory Total ml or mg Unopened	Initials