

Controlled Substances Disposal Form

DEA Address:

(as it appears on certificate)

Signatures:

DEA Registrant: _____

Date:

*Staff Surrendering: _____

*DEHS Custody: _____

DEA #: _____

*Sign when controlled substances are picked up

Record controlled substances placed into slurry bottle and expired or excess controlled substances that are in their original container.

[illegible]

