



DEPARTMENT OF ENVIRONMENTAL HEALTH & SAFETY
Laboratory Safety Office
1200 Carothers
Tallahassee, Florida 32306-4481
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CONTROLLED SUBSTANCE ORDER/RECEIPT RECORD

Principal Investigator: _____

DEA License #: _____

Date: _____

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	Order Date	Receipt Date	Controlled Substance	Form/Strength	Quantity/Amount
1.					
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