UNIVERSITY OF FLORIDA

Biennial Inventory of C-II Controlled Substances

Registrant:	Bldg:	Room:
DEA#		

	name of substance	formulation: tabs / caps / powder / liq	unit weight or concentration	# or volume in a full container	# of unopened containers	# or volume in open container
1						
2						
3						
4						
5						
6						
7						

Please sign & date each page

BOB / EOB

page ___ of ___

UNIVERSITY OF FLORIDA

Biennial Inventory of C-III-V Controlled Substances

Bldg:

Room:

Registrant:

5

6

7

DEA#								
	name of substance	formulation: tabs / caps / powder / liq	unit weight or concentration	# or volume in a full container	# of unopened containers	# or volume in open container		
1								
2								
3								
4								

Please sign & date each page ____ of ____