. . . .

Use new form each time a ne	ew lot is added to stock. Use multiple fo	orms to fully document distribution of each lot.	
Name of Controlled Substanc	e		
			03C- Exp
Appointing ALS Agency Name		Agency Code	NYS Controlled Substance License
Name of Supplier			Supplier DEA Registration Number
Manufacturer		Lot Number	mg Total Recieved from Supplier
Distribution to Substock(s)		Beginning Balance in Stock	mg.
Note: Specify all quantities in mill	igrams		
Date	Lot #	Quantity	Stock
Agent Signature		Substock Location	Balance
Date	Lot #	Quantity	Stock
Agent Signature		Substock Location	Balance
Date	Lot #	Quantity	Stock
Agent Signature		Substock Location	Balance
Date	Lot #	Quantity	Stock
Agent Signature		Substock Location	Balance
Date	Lot #	Quantity	Stock
Agent Signature DOH-3850 (11/14)		Substock Location	Balance Tribution on additional forms pg of

## Note: Specify all quantities in milligrams

Date	Lot #	Quantity	Stock		
Agent Signature		Substock Location	Balance		
Date	Lot #	Quantity	Stock		
Agent Signature		Substock Location	Balance		
Date	Lot #	Quantity	Stock		
Agent Signature		Substock Location	Balance		
Date	Lot #	Quantity	Stock		
Agent Signature		Substock Location	Balance		
Date	Lot #	Quantity	Stock		
Agent Signature		Substock Location	Balance		
Date	Lot #	Quantity	Stock		
Agent Signature		Substock Location	Balance		
Date	Lot #	Quantity	Stock		
Agent Signature		Substock Location	Balance		
Date	Lot #	Quantity	Stock		
Agent Signature		Substock Location	Balance		
DOH-3850 (11/14)		Contin	Continue distribution on additional forms pg of		