**Controlled Substance Usage Record- Working Solution**

(Use a separate usage record for each controlled substance prepared working solution)

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| **CONTACT INFORMATION** | | | | | | | |
| **Registrant:** | |  | | | | | |
| **Controlled Substance:** | |  | | | | | |
| **Strength and Form:** | |  | | | | | |
| **Date** | **Protocol Number/ Description of Use** | **Beginning Total Quantity** | **Quantity**  **Used** | | **Quantity Wasted** | **Remaining Total Quantity On Hand** | **Signature of Registrant/ Authorized Lab Worker** |
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