

**PURDUE UNIVERSITY
DEA Controlled Substances**

Record of Controlled Substance Purchases

Registrant Name: _____

DEA Registration Number: _____

Product Name	Amount Purchased	Date Received	Company <small>(Purchased from & DEA Number)</small>	Invoice or Shipping Document Number

Note: To ensure a comprehensive record, file a copy of the invoice or shipping document in folder and record the date of receipt on the invoice or shipping document.