# CS FORM C
## CONTROLLED SUBSTANCE INITIAL AND ANNUAL PHYSICAL INVENTORY

USC University of Southern California

A physical inventory must be completed and submitted to EH&S each calendar year to document the amount of controlled substances on hand. **This document fulfills the requirement for receipt of the DEA Biennial Controlled Substance Inventory.**

### Instructions

1. An accurate initial inventory of your controlled substances must be completed upon receipt of your DEA registration.
2. If no controlled substances are in your possession at time of recording, during initial or annual physical inventory, please complete *Information* and *Declaration* sections; return scanned PDF copy of completed CS form C to ehs-cs@usc.edu.
3. If you have controlled substances in your possession at time of recording, during initial or annual physical inventory, please complete *Information*, *Controlled Substances* and *Declaration* sections; return scanned PDF copy of completed CS form C to ehs-cs@usc.edu.
   o List all controlled substances and dilutions in your possession at time of recording.

**NOTE**: The DEA requires inventory be taken either at opening of business or at close of business on the inventory date. (21 CFR Part 1304.11 RECORDS AND REPORTS OF REGISTRANTS)

### Information

DEA Registrant:

DEA Registration #:                                    DEA Registration Renewal Date:

CS Storage Campus:     HSC ☐     UPC ☐          CS Storage Location (Building/Room #):

Email Address:

Controlled Substances were acquired or held during the calendar year: Yes ☐     No ☐

### Controlled Substances

**Date and Time** (e.g., 08/28/2023; 10 AM)

| Controlled Substance Name | Schedule (II – V) | Container ID # | Concentration (mg/ml) | Starting Quantity* | Current Quantity* | Expiration Date |
|---|---|---|---|---|---|---|
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

*Measure in weight (powder or crystals) or volume (liquids) or number of units (tablets or capsules).

### Declaration

| I attest that information listed here represents the actual inventory of controlled substances as of the close of business on this date. | Date: |
|---|---|
| DEA Registrant Signature: | |