Virginia Veterinary Controlled Drug Inventory
(Biennial – Every Two Years)

Veterinarian (Stocking Registrant):	Establishment Name:
Stocking Registrant DEA #:	Date of Inventory:
Schedule II **OR** Schedule III, IV, V	Beginning of Business **OR** Close of Business

Drug	Strength	Quantity

Expired Drugs Awaiting Disposal		
Drug	Strength	Quantity

Veterinarian-in-Charge: _____ Signed: _____