

Single Page DEA Form 222: Ordering Schedule II Controlled Substances

- 1. Complete part 1 and part 2 of DEA Form-222 and MAKE A COPY OF THE FORM BEFORE ORDERING.
- 2. Order your controlled substances and mail the original DEA Form-222 to the supplier, retain the copy for your own records.
 - **NOTE:** Mailing address may be different than the address on the 222 form. Verify mailing address with the supplier.
- 3. Upon receipt of the controlled substances, complete part 5 with the date and amount received.

See the completed example form on page 2

U.S. OFFICIAL ORDER FORMS - SCHEDULES I & II DRUG ENFORCEMENT ADMINISTRATION

OMB APPROVAL No. 1117-0010

EXAMPLE

Step #2 **PURCHASER INFORMATION** REGISTRATION INFORMATION SUPPLIER DEA NUMBER:# 2 3 5 6 PART 2 TO BE FILLED IN BY PURCHASER Sigma Aldrich
BUSINESS NAME 2425 South 2nd Street STREET ADDRESS St. Louis, MO 63104 CITY, STATE, ZIP CODE PART 1) TO BE FILLED IN BY PURCHASER RART 3: ALTERNATE SUPPLIER IDENTIFICATION - to be filled in by first supplier me in part 2) if order is endorsed to another supplier to fill. Step #1 PART 5 ALTERNATE DEA # TO BE **Bob Smith** FILLED IN BY Print or Type Name and Title Signature- by first supplier **PURCHASER** Bob Smith 1/2/24 Signature of Requesting Official (must be authorized to sign order form) Date OFFICIAL AUTHOR ED TO EXECUTE ON BEHALF OF SUPPLIER DATE NUMBER DATE PART 4: TO BE NILLED IN BY SUPPLIER NO. OF PACKAGE NUMBER DATE ITEM NAME OF ITEM REC'D REC'D **PACKAGES** SIZE ATIONAL DRUG CODE SHIPPED SHIPPED 1 g Oxycodone hyrochloride 1/29/24 Completed by supplier 1 g Methadone hydrochloride 1/29/24 3 Step #3. **AFTER** drugs are 8 received 10 12 13 14 15 16 17 18 Don't forget this box! 19 20 LAST LINE COMPLETED (MUST BE 20 OR LESS)