

**Controlled Substances
Chain of Custody**



THE UNIVERSITY OF TEXAS AT AUSTIN

Substance: _____ Quantity: _____

Relinquished by:	
_____	_____
Name (Signature)	Time
_____	_____
Name (Print)	Date
Received by:	
_____	_____
Name (Signature)	Time
_____	_____
Name (Print)	Date

Relinquished by:	
_____	_____
Name (Signature)	Time
_____	_____
Name (Print)	Date
Received by:	
_____	_____
Name (Signature)	Time
_____	_____
Name (Print)	Date

A copy of this form will remain in the possession of each party as part of the record.

Rev 0, 1/18/2017