

Cannabis Receipt Record

Receipt Record	
Permit #	
Name of supplier	
Address of the supplier	
Date received	
Address where cannabis was received	
Storage location (building and room)	
Description of cannabis materials including, if	
applicable, brand name.	
 If receiving a drug containing cannabis what is the form of the drug and its strength per unit? 	
 If receiving cannabis plants or seeds or cannabis that is not of a class set out in <u>Schedule 4</u> to the Act – the intended use. 	
Quantity of cannabis obtained	
Intended use	

^{**}Maintain all original documentation accompanying shipment