ARCOS TRANSACTION REPORTING

DRUG ENFORCEMENT ADMINISTRATION

MAILING INSTRUCTIONS

Retain duplicate for your records.
Mail the Original of completed form to:

Drug Enforcement Administration
ARCOS
P.O. Box 28293
Washington, D.C. 20038 - 8293

INSTRUCTIONS FOR CODING FORM

1. Characters should be printed neatly and conform as closely as possible to examples below.
2. All fields in the transaction (except the transaction code (Field 2) and the delete code (Field 3) are capable of being duplicated without coding the entire field to accomplish this. It is necessary that the first (leftmost) character in each field to be duplicated is coded using an equal (=) sign. The equal sign is the only character which can be used for this purpose.

OMB Approval No. 1117-0003

Under the Paperwork Reduction Act, a pe
collection of information unless it displ
number. Public reporting burden for this
to average 1 hour per response, including
searching existing data sources, gatherin
and completing and reviewing the collect
regarding this burden estimate or any
information, including suggestions for
Enforcement Administration, FOIA an
Washington, D.C. 20537; and to the
Paperwork Reduction Project No. 1117-0003

0 1 2 3 4 5 6 7 8 9 A B C D E F G H I J K L M N O P Q R S T U V W X Y Z

Number 0 Number 1 Number 2 Number 3 Number 4 Number 5 Number 6 Number 7 Number 8 Number 9 Letter A Letter B Letter C Letter D Letter E Letter F Letter G Letter H Letter I Letter J Letter K Letter L Letter M Letter N Letter O Letter P Letter Q Letter R Letter S Letter T Letter U Letter V Letter W Letter X Letter Y Letter Z

REPORTING REGISTRANT NUMBER	TC RO NO SS	DC EO LD TE	NATIONAL DRUG CODE			QUANTITY Nbr. of Packages, Volume or Weight	UNIT	ASSOCIATE REGISTRATION NUMBER	DEA ORDER FORM NUMBER	LOT NUMBER (DEA USE ONLY)	STRENGTH
			LABELER CODE	PRODUCT CODE	PKG. CODE						
FIELD 1	2	3	4			5	6	7	8	9	10
1	10	11	12		22	23	28	29	36	37	46	47	52	53	54

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Previous editions may be used.