

Investigational Product Accountability Log

Protocol Title:

Protocol Number:

Site Name/Number:

Principal Investigator:

Sponsor:

Study Drug Name/ID:

Dosage Form/Strength:

Accountability Log

Date	Lot/Batch No.	Received from (shipment info)	Quantity Received	Dispensed to (subject #/ initials)	Quantity Dispensed	Quantity Returned	Quantity Destroyed	Current Balance	Sign/Initial	Comments

Remarks:

Log Completed by (Name/Signature):

Date: