

THIS DOCUMENT CONTAINS A VOID PANTOGRAPH • THERMOCHROMIC INK • CHEMICAL VOID ALTERATION FEATURES • MICROPRINT RULES THAT READ "CALIFORNIA SECURITY PRESCRIPTION" ON THE FACE OF THE FORM • A WATERMARK ON THE BACK THAT READS "CALIFORNIA SECURITY PRESCRIPTION" • OPAQUE RX • SEQUENTIAL #

Doctor's Name, M.D.

LOT # C00000

Practice

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LIC# A12345

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NPI# 1234567890



PATIENT NAME \_\_\_\_\_

DOB \_\_\_\_\_

ADDRESS \_\_\_\_\_

**SAMPLE**

PRESCRIBER SIGNATURE **X** \_\_\_\_\_

DATE \_\_\_\_\_

DO NOT SUBSTITUTE

QUANTITY:  1-24  50-74  101-150  
 25-49  75-100  151 and over

REFILLS:  NR  1  2  3  4  5

UNITS \_\_\_\_\_



Serial # SWA001A00001

PRESCRIPTION IS VOID IF THE NUMBER OF DRUGS PRESCRIBED IS NOT NOTED: \_\_\_\_\_

CARX (01/20) SP24