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2018 Wisconsin Unwanted Prescription Drug Grant Collection Summary

Grant Recipient: Click here to enter text.

Collection (check all that apply): \Box Continuous (drop box	$\Box Single day collection$
\Box Multiple collection ev	vents

(Leave participant information blank when drug drop boxes are used.)

Number of Participants (if known):# participants

Note: If this is a multi-municipal/tribal collection, consolidate all collections on this sheet.

Collected Drug Weight Table

Item	Weight (pounds)
Inhalers and pressurized medicines	Enter weight
Mercury-containing medicines	Enter weight
Controlled substances	Enter weight
Non-controlled substances**	Enter weight
TOTAL	Enter total weight

** If drugs were not separated into controlled and non-controlled, list everything as controlled and mark the appropriate box below.

- 1. Were controlled and non-controlled drugs combined into one group (no separation)? □ Yes □ No
- Were collected drugs separated from packaging or removed from bottles?
 □ Yes □ No □ Sometimes
- 3. Were drugs disposed through the Department of Justice?
 □ Yes □ No □ Most were, some material went to a waste hauler