

# PRECURSOR SUBSTANCE - TRANSACTION REPORT

**PURSUANT TO ORS 475.940-475.955** you are required to report all sales, transfers or otherwise furnishings of any precursor substance described in ORS 475.940 [(1)] (3) (a) to (hh) and (nn), excluding (q) through (s) at least three days before delivery of the substance. Failure to report, or to knowingly provide false information on any Precursor Substance Report is a Class A Misdemeanor and is punishable by one year in jail and a \$2,500 fine.

**PART I:** To be filled out by the person who sells, transfers, or furnishes the Precursor Substance(s). If you are reporting the receipt of a precursor substance from an out-of-state source, you must fill out Part I of this form for the seller/furnisher of the precursor substance.

Person/Business Reporting: \_\_\_\_\_  
Address with zip code: \_\_\_\_\_  
Invoice Number: \_\_\_\_\_  
Telephone Number: \_\_\_\_\_ Date Ordered: \_\_\_\_\_

I know the information that I have furnished in Parts I & II of this report is true and correct and I hereby declare so by my signature. I have also examined the purchaser's/receiver's identification and it is consistent with that listed in Parts III & IV of this report.

Signature of transferrer: \_\_\_\_\_

**PART II:** Precursor substances sold, transferred or received from any transactions:

	Size / Units		Size / Units		Size / Units
Phenyl-2-propanone	_____	N-acetylanthranilic acid	_____	Phenylacetic acid	_____
Methylamine	_____	Ethylamine	_____	DL-Ephedrine	_____
D-lysergic acid	_____	Pyrolidine	_____	Anthranilic acid	_____
Ergotamine tartrate	_____	Diethyl malonate	_____	Malonic acid	_____
Ethyl malonate	_____	Barbituric acid	_____	Piperidine	_____
Morpholine	_____	L-Ephedrine	_____	Ephedrine	_____
Benzyl cyanide	_____	Ergonovine	_____	Propionic anhydride	_____
Insosafrole (isosafrole)	_____	Safrole	_____	Piperonal	_____
N-methylephedrine	_____	N-ethylephedrine	_____	N-ethylpseudoephedrine	_____
Hydriotic acid	_____	Gamma butyrolactone	_____	Butyrolactone	_____
1,2-butanolide	_____	2-oxanolone	_____	tetrahydro-2-furanone	_____
Dihydro-2(3H)-furanone	_____	Tetramethylene glycol	_____	1,4-butanediol	_____
N-methylpseudoephedrine	_____	Gamma-hydroxybutyric acid	_____		
3,4-Methylenedioxyphenyl-2-propanone	_____				

**PART III:** Purchaser Information

Name: \_\_\_\_\_ Business Name: \_\_\_\_\_  
Home Address/Zip: \_\_\_\_\_ Telephone #: \_\_\_\_\_  
Business Address/Zip: \_\_\_\_\_ Telephone #: \_\_\_\_\_  
Vehicle License #: \_\_\_\_\_ State: \_\_\_\_\_ I.D. (photo) type: \_\_\_\_\_ #: \_\_\_\_\_ State: \_\_\_\_\_

Purchaser is obtaining precursor substances for the following uses: \_\_\_\_\_  
\_\_\_\_\_  
at the following locations: \_\_\_\_\_  
\_\_\_\_\_

**PART IV:** Receiver Information [ ] Check box if receiver is same as purchaser in part III

Name: \_\_\_\_\_ Business Name: \_\_\_\_\_  
Home Address/Zip: \_\_\_\_\_ Telephone #: \_\_\_\_\_  
Business Address/Zip: \_\_\_\_\_ Telephone #: \_\_\_\_\_  
Vehicle License #: \_\_\_\_\_ State: \_\_\_\_\_ I.D. (photo) type: \_\_\_\_\_ #: \_\_\_\_\_ State: \_\_\_\_\_

**Mail or fax to: Oregon State Police**

Drug Enforcement Section

3565 Trelstad Ave. SE

Salem, Oregon 97317-9614 Voice: (503) 378-3720 Fax: (503) 363-5475