

Supplement to FORM B/P

SUPPLEMENT TO THE ASSESSMENT OF ANNUAL MEDICAL AND SCIENTIFIC REQUIREMENTS FOR SUBSTANCES IN SCHEDULES II, III AND IV OF THE CONVENTION ON PSYCHOTROPIC SUBSTANCES OF 1971

(to be furnished to the International Narcotics Control Board (INCB) pursuant to Economic and Social Council resolutions 1981/7, 1991/44, 1993/38 and 1996/30)

Country of territory.					Date.		
Competent office:					Title or function:		
Responsible officer's name:					Signature:		
Telephone number(s):					Signature.		
Code*	٤	Substance	Quantity**			Remarks	
			Kg	g		Kemarks	

Note:

- 1. This form may be used to submit a supplement to the current assessments.
- 2. The new total assessments will replace the quantities indicated in previous submissions of Form B/P and any subsequent modifications to those submissions.
- 3. Competent authorities are encouraged to provide an explanation of the circumstances necessitating the revision under the "Remarks" column.
- 4. Quantities of psychotropic substances to be exported should not be included.

This form should be completed and sent to: International Narcotics Control Board, Vienna International Centre, P.O. Box 500, 1400 Vienna, Austria, Telephone: + (43) (1) 26060-4277, Email: incb.secretariat@un.org, incb.psychotropics@un.org. This form can also be downloaded from the INCB website at: www.incb.org, under "Psychotropic Substances/Toolkit/Form B/P and Supplement".



Please recycle

^{*} Substance codes as included in the list of psychotropic substances under international control entitled "Green List".

^{**} Quantity to be added to (+) or to be deducted from (-) the previously submitted assessments.