

<b>Country: Benin (date: 29 July 2014)</b>		
<b>Documentation required (i.e. issued/endorsed by medical practitioner or authorized health authority)</b>	<b>Restrictions (i.e. qualitative and/or quantitative)</b>	<b>National Competent Authority (to be contacted for more detailed information)</b>
a) Valid medical prescription <input checked="" type="checkbox"/>	Days seven (7) / Quantities/Doses	Name: Interministerial Committee to Combat the Abuse of Narcotic Drugs and Psychotropic Substances (CILAS)  Address:  Tel.: 229 21 31 12 33  Fax:  E-mail: cilasben@yahoo.fr
b) Doctor's certificate endorsed by the health authorities of the country of residence <input checked="" type="checkbox"/>	Narcotic drugs <input checked="" type="checkbox"/>	
c) Certificate issued by the health authorities of the country of destination <input checked="" type="checkbox"/>	Psychotropic substances <input checked="" type="checkbox"/>	
d) Presentation of the original prescription at the Customs of the country of destination <input checked="" type="checkbox"/>	List of prohibited substances. If yes, please specify	
e) Other kind of documents, if yes, please indicate <input checked="" type="checkbox"/>  _____ _____	_____ _____  Other information	