## Power of Attorney for DEA Forms 222 and Electronic Orders

Test Pharmacy, Inc. 123 Main Street Newtown, PA 12345 DEA Number: 20202020

I, (name of person granting power), the undersigned, who is authorized to sign the current application for registration of the above named registrant under the Controlled Substances Act or Controlled Substances Import and Export Act, have made, constituted, and appointed, and by these presents, do make, constitute, and appoint
(name of Attorney-In-Fact), my true and lawful attorney for me in my name, place, and stead, to execute applications for books of official order forms and to sign such order forms in requisition for schedule I and II controlled substances, in accordance with Section 308 of the Controlled Substances Act (21 U.S.C. 828) and part 1305 of Title 21 of the Code of Federal Regulations. I hereby ratify and confirm all that said attorney shall lawfully do or cause to be done by virtue hereof.
(Signature of person granting power)  I,
(Signature of Attorney-In-Fact) Witnesses:
1
Notice of Revocation  The foregoing power of attorney is hereby revoked by the undersigned, who is authorized to sign the current application for registration of the above-named registrant under the Controlled Substances Act. Written notice of this revocation has been given to the Attorney-In-Fact this same day.
(Signature of person revoking power)
Witnesses:
1 2
Signed and dated on the day ofin the year
Reference: DEA Pharmacist's Manual, Section VIII, Ordering Controlled Substances