



**STATE BOARD OF PHARMACY**

800 SW Jackson, Suite 1414  
Topeka, Kansas 66612-1244  
www.pharmacy.ks.gov (785)296-4056

**INSPECTION:  
Retail Dealer  
Form I-10**

**INSPECTION INFORMATION**

Facility Name: \_\_\_\_\_ Registration Number: \_\_\_\_\_

Inspector Name: \_\_\_\_\_ Date: \_\_\_\_\_

**GENERAL INFORMATION**

**Facility Types:**

- Convenience Store     Department Store     Variety Store
- Farm and Ranch     Front End of Pharmacy     Health Food Store     Supermarket     Other

C-Compliant N/I-Needs Improvement N/C-Not Compliant  
U-Unassessed N/A-Not Applicable

**AREAS OF INSPECTION—K.S.A 65-1643(f) & K.A.R. 68-3-5**

- C  N/I  N/C  U  N/A Permit posted
- C  N/I  N/C  U  N/A Only nonprescription, noncontrolled drugs
- C  N/I  N/C  U  N/A Prepackaged, fully prepared by manufacturer/distributor
- C  N/I  N/C  U  N/A Labeled according to FD&C Act
- C  N/I  N/C  U  N/A Stored according to manufacturer's recommendation
- C  N/I  N/C  U  N/A OTC products observed for sale are in date (not expired)

**COMMENTS**

Self-Inspection