



**BOMRA/IL/IE/P01/F06**

**Botswana Medicines Regulatory Authority  
Acknowledgement Receipt or Dispatch  
Form 17  
(reg. 50)**

**Issue No. 2.0**

PLEASE COMPLETE AND RETURN TO:

Chief Executive Officer  
Botswana Medicines Regulatory Authority  
Private Bag 2 Gaborone Station  
Plot no. 112 Gaborone International Finance Park  
Gaborone  
Tel: 3138730

Receipt of Habit-Forming Drugs, importation of which was authorized under the following permit/s is acknowledged

Importing Company

Import Permit No \_\_\_\_\_ Date of issue \_\_\_\_\_

Date Received	Drug Name	Quantity Received	Quantity of Substance as base in grams	Export Permit No	Exported from	Discrepancy



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Authorized Importer \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_