For lodine and Methyl Sulfonyl Methane (MSM)

PRECURSOR TRANSACTION RECORD



This record is to be completed for a purchase of any of the substances listed in Part I in quantities exceeding those specified. The seller is <u>required</u> to obtain the following information and is <u>required to retain the form for three years</u> at the place of business.

The **seller** is required to produce this record to the Washington State Patrol or any law enforcement agency upon request, and is legally responsible for the accuracy of this record.

The purchaser is required to produce state or federal photo identification (driver license/ID card, military ID, etc.).

Pursuant to RCW 69.43.135, failure by the seller to obtain and retain the required information is a misdemeanor.

Part I – Ch	eck substance(s) sold, transferred, or furnished.	Indicate number of	of units and size	of the units.
		Units	Size	Purpose
	Methyl Sulfonyl Methane (MSM) – more than two pounds (in any transaction)			
	Liquid lodine Matrix – greater than 2% or more (to those authorized under the UCSA)			
	Crystal Elemental Iodine – Any quantity			
				Intended use for purchased substance(s)

Part II - Seller: To be filled in by the person who sells, transfers, or furnishes the substance(s) checked in Part I.

First	Middle	Last	
Business Name:			
Business Address	5:		
	Street		
	City	State	Zip
Signature of Selle			
	(Signature verifies the accuracy of all informat	ion on form.)	
I – Purchaser: To b	be filled in by the <u>seller</u> from photo ID p	rovided by the purchaser.	
Date:	Time:		
Name:			
First	Middle	Last	
Photo ID:			
Photo ID: Type	Numl	ber	
Туре			
Туре	Numl ss (physical address only – DO NOT u		
Туре			Apartment number
Type Residential Addre			Apartment number
Type Residential Addre			Apartment number
Type Residential Addre Street	ss (physical address only – DO NOT u	se a PO Box number):	

If you have any questions, contact the WSP Investigative Assistance Division at 360-704-2400 (Fax: 360-704-2973).