

**DOOR COUNTY JAIL – PRE-HUBER MEDICATION
NOTIFICATION FORM (PRESCRIPTIONS ONLY)**

At the time of booking, all *doctor prescribed medication(s)* must be turned over to the Health Service Unit for approval. Prescription medications brought in *must* be in the *original pharmacy filled container with the proper label and must have been filled by a pharmacy within the previous 30 days*. Huber inmates will be responsible for replacement of prescription medications while incarcerated. The Door County Jail is not responsible for any medical expense of Huber inmates. **IF IT'S NOT PRESCRIBED BY A PHYSICIAN, DO NOT BRING IT!**

Do any of your prescribed medications have a warning/restriction advising you not to operate a motor vehicle?

Yes, list medications:

No

I have read the above notification and understand that any false presentation of medications will terminate my Huber privileges immediately.

PRINT NAME: _____

SIGNATURE: _____

DATE _____