

CANNABINOIDS**PharmLabs R&D Laboratory Sample Chain of Custody**

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CANNABIS LABORATORY SOLUTIONS

Company Name Relinquishing Samples:	
Company Rep. Name:	<i>To be filled in by PharmLabs Rep.</i>
Account Email:	Client ID:
Phone:	Date & Time of Submission:
Address:	PL Rep Name:
License #:	PharmLabs DEA License# RP0611043

**PJLA**
TestingAccreditation # [85368](#)**SAMPLE NAME**

(Name will be entered into PharmWare LIMS and on the COA exactly as it is denoted below)

CAN+ = 12 of the basic cannabinoids. **CANX** = All the cannabinoids we test for 37 and counting! **D9C** = Delta 9 THC confirmation method via GC MS/MS

SAMPLE NAME (Name will be entered into PharmWare LIMS and on the COA exactly as it is denoted below) <i>CAN+ = 12 of the basic cannabinoids. CANX = All the cannabinoids we test for 37 and counting! D9C = Delta 9 THC confirmation method via GC MS/MS</i>			Sample Type				Results Format <small>(For Potency Testing Only)</small>		Test Type <small>(For FP please mark either CAN+ or CANX, D9C not included in a FP)</small>																
			Internal Use Only LIMS ID	Flower/Plant	Concentrate	Edible / Tincture	Topical / Transdermal	Total MG	Percent (%) & Mg/g	Potency Cannabinoids (CAN+)	Potency Cannabinoids (CANX)	Potency Cannabinoids (D9C)	Terpenes (TER)	Full Panel (FP)	Residual Solvents (RES)	Pesticide Screen (PES)	Mycotoxins (MTO)	Heavy Metal (HME)	Microbial Panel (MIC)	Total Yeast & Mold (TYM)	Filth & Foreign (FV)	Rush Order (RUO)	PHOTO (P)		
1																									
2																									
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10																									
11																									
12																									

Client Printed Name

Client Signature
Submitting Samples

Date

PharmLabs Signature
Receiving Samples

Date

Notes to lab:

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 San Diego, CA 92110
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