TRYPTAMINES & ALKALOIDS

PharmLabs R&D Laboratory Sample Chain of Custody

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Pharm/Vare

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

PJLA
Testing
Accreditation #85368

AMU= Ibotenic Acid, Muscimol & Muscarine TRY= Norbaeocystin, Aeruginascin, Baeoeystin, Norpsilocin BLU= Nuciferine & Apomorphine KTM= Mitragynine & 7-hydroxy Mitragynine PSY= DEA License may be required for R&D Potency testing of Psilocin and Psilocybin, contact us. SAMPLE NAME (Name will be entered into PharmWare LIMS and on the COA exactly as it is denoted below)		INTERNAL USE ONLY - LIMS ID	Sa	ampl	le Ty	pe	Results Format (For Potency Testing Only)				Test Type (For Full Panel please mark <u>one</u> of the Potency choices) (Full Panel Includes – Heavy Metals, Pesticides, Mycotoxins, Residual Solvents, Microbial & Photo)									
			Plant/Fungi	Concentrate	Edible / Tincture	Other	Percent (%) & Mg/g	Mg/ml (req 2ml min.)	Total MG		Potency Kratom (KTM)	Potency Blue Lotus Flower (BLU)	Potency 4A- Dimethyltryptamine (4AD)	Potency Amanita Muscaria (AMU)	Potency Tryptamine (TRY)	Potency Psilocybin & Psilocin (PSY)	Full Panel (FPT)	Rush Order (RUO)	РНОТО (Р)	
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2																				
3																				
4										-										
5										-										
6																				
7																				
8																				
9																				
10																				
11																				
12																				

Client Printed Name

Client Signature Relinquishing Samples

Date

PharmLabs Signature Receiving Samples

Date

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