

<b>Report To:</b> Licence Holder: _____ Contact Person: _____ Address: _____ Telephone: _____ E-mail 1: _____ E-mail 2: _____ E-mail 3: _____	<b>Invoice To: Same as "Report To"</b> Contact / Company: _____ Address: _____ Telephone: _____ E-mail 1: _____ E-mail 2: _____ E-mail 3: _____ PO # _____	<b>Submission Date (YYYY-MM-DD):</b> _____ <b>Health Canada Licence Number:</b> _____ <div style="border: 1px solid black; padding: 5px; margin-top: 10px;"> <b>Ship Sample to:</b> Anandia - Testing Division - Completed by Anandia upon COC approval.         </div>	<i>Shaded Areas for Laboratory Use Only</i> <b>Turnaround Time from sample receipt:</b> <b>Normal:</b> up to 7 business days  <b>Rush<sup>1</sup>:</b> 2 Business days  1. Potency is the only test that can be rushed.
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Chain of Custody Form #	Special instructions and notes:		Storage Conditions (if applicable):							Analysis Requested:							
	Anandia ID #:	Client Sample ID	Matrix (Choose from drop down list)	Provide Matrix Detail	# of Containers	Units per container	Container weight (g)	Unit Weight (g)	Gross Weight (g)	Turnaround Time	Potency (THCA, THC, CBDA, CBD, CBN)	Disintegration	Appearance	Content Uniformity (include special instructions)	Water Activity	Weight Verification	Other (provide special instructions)

<p><b>This form constitutes a sample transfer request when signed below by authorized Anandia personnel.</b></p> <p><b>Approved to Ship:</b> _____ <b>Date Approved:</b> _____ <b>Approver's Name:</b> _____</p> <p style="text-align: center;">_____ <i>Approver's Signature</i></p>	<p><b>Sample Receiving Checklist</b></p> <p>Documentation      Sample Containers      Sample Size</p> <p>Sample Storage Location: _____ Sample Storage Temperature: _____ °C</p> <p>Comments: _____</p>
<p>Please fill out the COC form completely, including container weights. Please cross-check the sample names on the COC form with the names and weights on the containers to ensure consistency. Anandia will retain unused sample material for two (2) weeks following completion of the requested testing.</p> <p>I, the undersigned, am authorized under the Cannabis Act to possess cannabis and submit cannabis-derived products for analytical testing services. As per the Testing Services Agreement executed with Anandia, I acknowledge that Anandia makes no warranties, express or implied, with respect to the services.</p>	

Chain of Custody			
Contents confirmed by: _____ Date (YYYY-MM-DD): _____ <small style="margin-left: 40px;">Printed name</small>	Received by: _____ Date (YYYY-MM-DD): _____		
Relinquished by: _____ Date (YYYY-MM-DD): _____ <small style="margin-left: 40px;">Printed name</small>	Confirmed by: _____ Time: _____		
_____ <small>Signature of Relinquisher</small>			