

# CHAIN OF CUSTODY

QUALITY ASSURANCE ANALYSIS REQUEST

TRICHOME ANALYTICAL

6000 COMMERCE PKWY STE I, MT LAUREL, NJ 08054 // PH: 856-316-0600

ISO/IEC 17025:2017 A2LA CERT# 5913.01 // DEA# RT0581098 // NJCDS# 10CA00034900 // NJ HEMP# 34\_00077

CLIENT: \_\_\_\_\_

CONTACT NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

EMAIL: \_\_\_\_\_

LICENSE ID: \_\_\_\_\_

PHONE: \_\_\_\_\_

SPECIAL INSTRUCTIONS: \_\_\_\_\_

SAMPLE ID	SAMPLE DESCRIPTION (BATCH / LOT ID)	PANELS				INDIVIDUAL ANALYSES										LAB USE ONLY
		FULL PANEL	PROFILE PANEL	NY CHP PANEL	NJMMP PANEL	CANNABINOIDS	TERPENES	METALS	PEST. & MYCO	MICROBIAL	SOLVENTS	MOISTURE	WATER ACTIVITY	FOREIGN MATTER	OTHER*	
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REQUESTED TURN AROUND TIME:  STANDARD  RUSH (30% surcharge applies)

- 1. NJMMP required pesticides only (48)
- 2. Expanded pesticide panel (68)
- 3. Quality Indicators: Total Yeast and Mold, Total Aerobic Bacteria Count, Total Enterobacteriaceae Count, Total Coliforms, E. coli
- 4. Common Pathogens: Shiga toxin-producing E. coli (STEC), Salmonella spp., Aspergillus (flavus, fumigatus, niger, terreus)

**\*INDICATE OTHER ANALYSIS REQUEST:**

**By signing below, I affirm that I am a representative of the above listed Entity, and that all samples being submitted to Trichome Analytical are legally produced and transported under federal and/or state guidelines.**

PRINT NAME	SIGNATURE	DATE
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Remit this form with your samples and payment to: Trichome Analytical, 6000 Commerce Parkway Suite I, Mount Laurel, NJ 08054

LAB USE ONLY
Received By: _____ Signature: _____ Date: _____
Notes: _____