

TRANSPORTATION MANIFEST & CHAIN OF CUSTODY DOCUMENT

CUSTOMER INFORMATION			
CUSTOMER NAME:	INDOOR GROW <input type="checkbox"/>	OMMA License #:	
	OUTDOOR GROW <input type="checkbox"/>		
Street Address:			
City, State, Zip:			
Contact Name:			
Email: <small>*per company policy, results will only be sent to the emails listed on this form.</small>			
Telephone:			



13919-B May Ave #312
OKC, OK 73134
TAAA-41UC-PN8G
info@verdetesting.com

TRANSPORTER NAME:
PHONE NUMBER
TRANSPORT LICENSE #



I hereby authorize Verde Testing to transport the inventory listed herein to:
 Havard Industries, LLC
 OMMA LIC # LA4A-8SPC-5FH4 JHAVARD@PROTONMAIL.COM
 6300 Boucher Dr. Edmond, OK 73034

Sample Number	Retest?	R&D	Strain / Product Name	Sample Matrix Code	Strain Type	Batch Number	Harvest Date	Sample Amount (g or ml)	REQUESTED TESTS:														Batch Test Potency & Terp Bundle	Batch Test OK Compliance Bundle
									Flower Compliance Panel	Batch A Panel	Batch B Panel	Pre-Roll Panel	Potency	Terpenes	Microbial	Moisture %	Foreign Matter	Pesticides	Heavy Metals	Solvents	Mycotoxins	Water Analysis		
Lab Use Only	Check box if this is a retest.	R&D Failures will not be reported to OMMA		(See codes below)	I - Indica S - Sativa H - Hybrid				see chart in Sampling SOP for clarification on which panel is appropriate for your product															
Sample Matrix Codes:	P - Pre-Roll			M - Medical Cannabis		H - Industrial Hemp		O - Oil/Tincture			E - Edible				C - Concentrate					*PLEASE INDICATE EXTRACTION METHOD IN NOTES				

RELEASE OF CUSTODY: By signing below, I verify that the information on this form is correct and acknowledge that sample information cannot be changed.

CUSTODY RELEASE: (print name)	TIME	DATE	ACCEPTANCE OF CUSTODY: (print name)	TIME	DATE
(Signature)			(Signature)		
CUSTODY RELEASE: (print name)	TIME	DATE	ACCEPTANCE OF CUSTODY: (print name)	TIME	DATE
(Signature)			(Signature)		

ADDITIONAL NOTES: