



## PharmLabs Chain of Custody

48220 Jackson Street, Suite A2, Coachella, CA 92236

Phone: 760-279-8279

License #: C8-17-0000011-TEMP

Company Name:	Phone:	
Account Email:	Client Name <i>(print)</i> :	
Address:	Client Signature:	Date:

Please fill out your company information, sample name, sample type, and test type. Make sure to sign and date.			Sample Type	Test Panel									Comments
Sample Name	Sample ID <i>(Internal Use)</i>	Lab ID <i>(Internal Use)</i>	Flower/trim, Kief/hash, Conc/distillate/isolate, Edible/tincture/tonic, Topical/salve	Cannabinoids	Pesticides	Solvents	Microbial	Mycotoxins	Terpenes	Water/Moisture	Foreign Matter	Heavy Metals	
1													
2													
3													
4													
5													
6													
7													
8													
9													
10													
11													
12													

PharmLabs Rep Receiving Samples <i>(print)</i> :	
Signature:	Date: