



CATLAB, LLC
19 Levesque Dr. #3
Eliot, ME 03903
207-200-9950
ME OCP: MTF368

Certificate of Analysis

Client Name	Curaleaf	License Number	DSP105
Address	5 Drapeau St Suit 101 Biddeford ME 04005	Phone	207-815-3020
Order ID	1739	Sample Type	Dried Flower
Sample ID	06442	Strain	F9 23H1 230209CRE
METRC Sample ID		Serving Mass (g)/ Package / Collected Sample Weight	
Date Received	04/05/2023	Collected By	
Date/Time of Collection	04/04/2023 02:00 PM	Date Generated	04/18/2023

Summary of Results

Water Activity Profile	
All Results	Pass

Filth and Foreign Materials Screening	
All Results	Pass

Microbiological Screening	
All Results	Pass

Moisture Screening	
All Results	Pass

Heavy Metals Screening	
All Results	Pass

Pesticides Screening	
All Results	Pass

Potency Profile	
Cannabinoid	Result mg/g
CBDV	< RL
THCV	0.186
CBDA	0.530
CBD	< RL
CBG	0.759
CBN	< RL
CBGA	3.81
CBC	< RL
exoTHC	< RL
Δ9-THC	7.51
Δ8THC	< RL
THCA	224
Total Cannabinoids %	23.7
Total CBD mg/g	0.464
Total THC mg/g	204
Total CBD %	0.0464
Total THC %	20.4

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Summary of Results

Terpenes Profile	
Terpene	Result %
α-Pinene	0.015
Camphene	0.0059
β-Pinene	0.028
β-myrcene	0.15
δ3-carene	< RL
α-Terpinene	< RL
D-Limonene	0.14
p-Cymene	< RL
Eucalyptol	< RL
Ocimene	< RL
γ-Terpinene	< RL
Terpinolene	< RL
Linalool	0.077
Isopulegol	0.014
Geraniol	0.049
β-Caryophyllene	0.55
α-Humulene	0.16
cis-Nerolidol	0.31
trans-Nerolidol	0.44
Guaiol	0.0088
Caryophyllene Oxide	0.16
α-Bisabolol	0.16
Total Terpenes (%)	2.3

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Potency

Date Analyzed: 04/13/23

Prep Date: 04/12/23

Instrument: UPLC CAT-0002/CAT-0151

Method: SOP-QA-0016

Analyst: AC

Potency	Result %	Result (mg/g)	Result (mg/package)	RL (%)	RL (mg/g)
CBDV	< RL	< RL	N/A	0.0101	0.101
THCV	< RL	< RL	N/A	0.0101	0.101
CBDA	0.0530	0.530	N/A	0.0101	0.101
CBD	< RL	< RL	N/A	0.0101	0.101
CBG	0.0759	0.759	N/A	0.0101	0.101
CBN	< RL	< RL	N/A	0.0101	0.101
CBGA	0.381	3.81	N/A	0.0101	0.101
CBC	< RL	< RL	N/A	0.0101	0.101
exoTHC	< RL	< RL	N/A	0.0101	0.101
Δ 9-THC	0.751	7.51	N/A	0.0101	0.101
Δ 8THC	< RL	< RL	N/A	0.0101	0.101
THCA	22.4	224	N/A	0.0101	0.101

Note: Results reported based on dry weight as per licensee request. CRM failure for THC > 120%. Flag required.

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Pesticides

Date Analyzed: 4/18/23
Instrument: CAT-0162

Prep Date: 4/13/23
Method: SOP QA-0040

Analyst: LCH

Analyte	Finding (PPB)	LOQ (PPB)	Limit (PPB)	Pass/Fail	Analyte	Finding (PPB)	LOQ (PPB)	Limit (PPB)	Pass/Fail
Abamectin	< RL	403	500	Pass	Etofenprox	< RL	78.1	400	Pass
Acephate	< RL	55.6	400	Pass	Etoazole	< RL	61.2	200	Pass
Acequinocyl	< RL	1150	2000	Pass	Fenoxycarb	< RL	89.9	200	Pass
Acetamiprid	< RL	31.2	200	Pass	Fenpyroximate	< RL	83.1	400	Pass
Aldicarb	< RL	31.2	400	Pass	Fipronil	< RL	112	400	Pass
Azoxystrobin	< RL	33.2	200	Pass	Flonicamid	< RL	31.2	1000	Pass
Bifenazate	< RL	31.2	200	Pass	Fludioxonil	< RL	62.5	400	Pass
Bifenthrin	< RL	96.5	200	Pass	Hexythiazox	< RL	54.3	1000	Pass
Boscalid	< RL	42.9	400	Pass	Imazalil	< RL	87.3	200	Pass
Carbaryl	< RL	37.0	200	Pass	Imidacloprid	< RL	39.8	400	Pass
Carbofuran	< RL	31.2	200	Pass	Kresoxim-methyl	< RL	53.6	400	Pass
Chlorantraniliprole	< RL	92.2	200	Pass	Malathion	< RL	66.0	200	Pass
Chlorfenapyr	< RL	919	1000	Pass	Metaxyl	< RL	56.4	200	Pass
Chlorpyrifos	< RL	74.5	200	Pass	Methiocarb	< RL	31.2	200	Pass
Clofentezine	< RL	56.7	200	Pass	Methomyl	< RL	31.2	400	Pass
Cyfluthrin	< RL	798	1000	Pass	Methyl parathion	< RL	193	200	Pass
Cypermethrin	< RL	196	1000	Pass	MGK-264 ²	< RL	70.2	200	Pass
Daminozide	< RL	329	1000	Pass	Myclobutanil	< RL	37.3	200	Pass
DDVP (Dichlorvos)	< RL	31.2	1000	Pass	Naled	< RL	42.2	500	Pass
Diazinon	< RL	55.3	200	Pass	Oxamyl	< RL	31.2	1000	Pass
Dimethoate	< RL	39.9	200	Pass	Paclobutrazol	< RL	52.5	400	Pass
Ethoprophos	< RL	33.9	200	Pass					

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Pesticides

Date Analyzed: 4/18/23
Instrument: CAT-0162

Prep Date: 4/13/23
Method: SOP QA-0040

Analyst: LCH

Analyte	Finding (PPB)	LOQ (PPB)	Limit (PPB)	Pass/Fail
Permethrin ³	< RL	199	200	Pass
Phosmet	< RL	55.8	200	Pass
Piperonyl butoxide	< RL	59.0	2000	Pass
Prallethrin	< RL	103	200	Pass
Propiconazole	< RL	59.5	400	Pass
Propoxur	< RL	31.2	200	Pass
Pyrethrins ¹	< RL	248	1000	Pass
Pyridaben	< RL	59.8	200	Pass
Spinosad ⁴	< RL	62.4	200	Pass
Spiromesifen	< RL	62.5	200	Pass
Spirotetramat	< RL	37.5	200	Pass
Spiroxamine	< RL	37.9	400	Pass
tebuconazole	< RL	69.2	400	Pass
Thiacloprid	< RL	31.2	200	Pass
Thiamethoxam	< RL	62.6	200	Pass
Trifloxystrobin	< RL	59.3	200	Pass

Disclaimer:

1. Pyrethrin is measured as cumulative residues of Pyrethrin, Cinerin, and Jasmolin (CAS # 8003-34-7).
2. MGK-264 is measured as cumulative residue of MGK-264 A and MGK-264 B (CAS # 113-48-4).
3. Permethrin is measured as cumulative residue of cis- and trans- permethrin isomers. (CAS # 54774-45-7 and 51877-74-8, respectively).
4. Spinosad is a measured as cumulative residue of Spinosad A and Spinosad D (CAS # 168316-95-8 and 131929-60-7, respectively).

QC samples outside criteria for the following analytes: Acequinocyl, methomyl, aldicarb, methyl parathion, paclobutrazol, propiconazole, and trifloxystrobin in CCVs Fenoxycarb, naled, and spiromesifen in LCS Bifenazate, chlorpyrifos, fipronil, methyl parathion, naled, pyridaben, spiromesifen, spiroxamine, and trifloxystrobin in spiked matrix sample

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Heavy Metals

Date Analyzed: 4/12/23
Instrument: CAT-0093

Prep Date: 4/7/23
Method: SOP-QA-0030

Analyst: ITG

Metals	Result (ug/kg)	RL (ug/kg)	Action Level (ug/kg)	Pass/Fail
Arsenic	< RL	84.7	200	Pass
Cadmium	< RL	55.9	200	Pass
Lead	< RL	24.7	500	Pass
Mercury	< RL	4.89	100	Pass

Microbial Analysis

Prep Date Bacteria: 4/10/23
Date Analyzed Bacteria: 4/11/23
Instrument: CAT-0140, CAT-0152

Prep Date Ecoli/SLM: 4/10/23
Date Analyzed Ecoli/SLM: 4/11/23
Method: SOP-QA-0028, SOP-QA-0038

Prep Date Yeast and Mold: 4/10/23
Date Analyzed Yeast and Mold: 4/13/23
Analyst: KW

Contaminants	Result (CFU/g)	RL (CFU/g)	Action Level (CFU/g)	Pass/Fail
Total Aerobic	< RL	100	100,000	Pass
Total Yeast/Mold	1400	100	10,000	Pass
Total Enterobacter	< RL	100	1,000	Pass
Total Coliform	< RL	100	1,000	Pass
Escherichia Coli (E. Coli)	< RL	1	1	Pass
Salmonella spp	< RL	1	1	Pass

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Filth and Foreign Materials

Date Analyzed: 4/14/23
Instrument: Visual Inspection

Prep Date: 4/14/23
Method: SOP-QA-0018

Analyst: ITG/JG

Analyte	Result	Action Level	Pass/Fail
Sand, Soil, Cinders, Dirt, and Mold (%)	0	25	Pass
Embedded Foreign Material (%)	0	25	Pass
Insect Fragment	0	1	Pass
Hair	0	1	Pass
Mammalian Excreta	0	1	Pass

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Water Activity

Date Analyzed: 04/12/23
Instrument: Rotronic CAT-0020

Prep Date: 04/12/23
Method: SOP-QA-0012

Analyst: JG/IG

Analyte	Finding (Aw)	RL (Aw)	Action Level (Aw)	Pass/Fail
Water Activity	0.40	0.11	0.65	Pass

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Terpenes

Date Analyzed: 4/13/23
Instrument: CAT-0114

Prep Date: 4/12/23
Method: SOP QA-0032

Analyst: RW

Terpenes	Result (% weight)	RL (% weight)
α-Pinene	0.015	0.0050
Camphene	0.0059	0.0050
β-Pinene	0.028	0.0050
β-myrcene	0.15	0.0050
δ3-carene	< RL	0.0050
α-Terpinene	< RL	0.0050
D-Limonene	0.14	0.0050
p-Cymene	< RL	0.0050
Eucalyptol	< RL	0.0050
Ocimene	< RL	0.0050
γ-Terpinene	< RL	0.0050
Terpinolene	< RL	0.0050
Linalool	0.077	0.0050
Isopulegol	0.014	0.0050
Geraniol	0.049	0.025
β-Caryophyllene	0.55	0.0050
α-Humulene	0.16	0.0050
cis-Nerolidol	0.31	0.0054
trans-Nerolidol	0.44	0.0029
Guaiol	0.0088	0.0050
Caryophyllene Oxide	0.16	0.0050
α-Bisabolol	0.16	0.0050

QC failure for some analytes of interest.

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Moisture Content

Date Analyzed: 04/10/23
Instrument: Satorius CAT-0036

Prep Date: 04/10/23
Method: SOP-QA-0019

Analyst: JG/DPR

Analyte	Finding (%)	RL (%)
Moisture Content	< RL	6.0

Deisy Peña-Romero Lab Director



19 Levesque Drive
 Eliot, Maine 03903
 207-200-9950
 MITF368
 ISO #112380

CATLAB, LLC CHAIN OF CUSTODY RECORD

Order
 1739

Report To: **Cathryn Kloetzli, Chris Illes, Amanda Leach**
 Cultivator or Mfg Name: **Curaleaf**
 Email Address (for results): **cathryn.kloetzli@curaleaf.com**
christopher.illes@curaleaf.com

Adult Use: _____ R&D: _____ Medical:
 Personal/Other: _____

Address: **5 Drapeau St. Suite 101**
 City, State: **Biddeford, ME 04005**
 Zip Code: **207.815.3020 X4157**
 Phone: _____

Billing Address (if different): **same**
 Cultivator or Mfg License or Reg Number: **ACDD863 (Adult Use)**
DSP105 (Medical)
amanda.leach@curaleaf.com

Sample Number (lab use only)	Sample Identification (as found on container)	Sample Type*	Date Collected	Time Collected	Sample Size	Serving Size**	Servings per Package**	Potency***	Homogeneity	Terpene Profile	Residual Solvents	Filth and Foreign Material	Microbiological Impurities	Water Activity	Aflatoxins/Ochratoxins	Metals	Pesticides	Percent Moisture
S E E	a t t a c h	e d	s	h	e	t	N/A	N/A	X			X	X	X		X	X	X*

Comments, special instructions, or temperature requirements:
Please calculate dry weight potency.

Sample types: flower, wet/frozen flower, trim, concentrate, CO₂/solvent based concentrate, edible, capsule, tincture, or other
 **For edibles, tinctures, and capsules please include serving size and servings per package information
 ***Potency analysis tests Δ-9-THC, THCA, CBD, CBG, CBN, CBDA, THCV, CBDV, CBC, CBGA, exoTHC, Δ-8-THC

Samples collected by (print): **Thomas Begin, RIC16839**
 Signature: _____ Date: _____

Received in field by (print): _____ Date: **4/5/23**
 Signature: _____ Time: **1:05**

Received at Lab by (print): _____ Date: _____
 Signature: _____ Time: _____

Order 1739

Sample Number (lab use only)	Sample ID (as on container)	Sample Type	Date Collected	Time Collected	Sample Size	Analyses Requested
		Flower				All items marked 'X' on CoC Record. For X*: Please calc 'dry weight potency'
6439	F16 23H2 230316BDC	Flower	4/4/23	2:00	11.5 G	
6440	F9 22H2 221209KOS	Flower	4/4/23	2:00	11.2 G	
6441	F11 23H1 230211BBY	Flower	4/4/23	2:00	11.3 G	
6442	F9 23H1 230209CRE	Flower	4/4/23	2:00	11.2 G	
6443	F11 23H1 230211TOG	Flower	4/4/23	2:00	11.0 G	
6444	F16 23H1 230116KMN	Flower	4/4/23	2:00	11.3 G	
6445	F9 23H1 230209PNT	Flower	4/4/23	2:00	11.8 G	
6446	F12 23H1 230112KOS	Flower	4/4/23	2:00	11.3 G	
6447	F14 23H1 230214KOS	Flower	4/4/23	2:00	11.4 G	
6448	F10 23H1 230210CRE	Flower	4/4/23	2:00	12.0 G	
6449	F11 23H1 230211BOG	Flower	4/4/23	2:00	11.5 G	
6450	F14 22H3 221214RST	Flower	4/4/23	2:00	11.4 G	
6451	F14 23H1 230214CRE	Flower	4/4/23	2:00	11.3 G	
6452	F17 22H3 221217CRE	Flower	4/4/23	2:00	11.4 G	
6453	F12 23H1 230102CRE	Flower	4/4/23	2:00	11.3 G	
6454	F15 23H1 230215CRE	Flower	4/4/23	2:00	11.3 G	
6455	F9 22H2 221209MBZ	Flower	4/4/23	2:00	11.2 G	

6456 F16 23H2 230316MBZ

Flower

4/4/23

2:00

11.1g

Same

Sample Receipt Condition Report

CATLAB, LLC

Order ID: 1739

Samples Received Via: CATLAB Sampler/Courier Licensee Certified Sampler
 Custody Seals Present and Intact on Transport Container: Yes No N/A Comments: _____
 Custody Seals Present and Intact on Sample Containers: Yes No N/A Comments: _____
 Type of submittal: Medical Adult Use Other Comments: _____
 Receipt Temp: _____ Humidity: _____ If needed, ice present? Y / N Ambient:

Samples Received			
	# of Samples	# of Containers	Notes:
Flower	18	18	
Trim			
Pre-Roll			
Infused Pre-Roll			
Retail Units			
Concentrate			
Infused Edibles			
Solid Batch			
Liquid Batch			

Proper Sample Containers/Enough Sample?	<input checked="" type="checkbox"/> Y / <input type="checkbox"/> N / <input type="checkbox"/> NA	Comments:
Analysis Marked on COC Match Bottles Rec'v?	<input checked="" type="checkbox"/> Y / <input type="checkbox"/> N / <input type="checkbox"/> NA	Comments:
Date/Time/ID on Samples Match COC?	<input checked="" type="checkbox"/> Y / <input type="checkbox"/> N / <input type="checkbox"/> NA	Comments:
Rushes Communicates to analyst in writing?	<input type="checkbox"/> Y / <input type="checkbox"/> N / <input checked="" type="checkbox"/> NA	Comments:
Sample tampered, manipulated, adulterated or contaminated?	<input type="checkbox"/> Y / <input checked="" type="checkbox"/> N / <input type="checkbox"/> NA	Comments:
AUMP Sample size by Batch Size OK?	<input type="checkbox"/> Y / <input type="checkbox"/> N / <input checked="" type="checkbox"/> NA	Comments:
Samples collected in the manner required by OMP?	<input type="checkbox"/> Y / <input type="checkbox"/> N / <input checked="" type="checkbox"/> NA	Comments:
Transport Manifest Received?	<input type="checkbox"/> Y / <input type="checkbox"/> N / <input checked="" type="checkbox"/> NA	Comments:
Samples Received in Metrc?	<input type="checkbox"/> Y / <input type="checkbox"/> N / <input checked="" type="checkbox"/> NA	Comments:

Initials/Date: ES 4/16/23

Notes/Comments: * Report Potency on a dry Weight Bases *

Reviewer's Checklist

- Client ID/Contact
- Reporting Instructions
- Rushes Communicated
- Temp, Condition OK
- Sample ID/Date/Time
- Matrix
- TAT Correct
- Correct Analyses

- If Adult Use:**
- Logged in Metrc
 - Transfer Manifest
- If CATLAB Samples:**
- Sampling Form
 - Attestation Form

Initials: LG Date: 4-6-23



OFFICE OF MARIJUANA POLICY

DEPARTMENT OF ADMINISTRATIVE AND FINANCIAL SERVICES

Maine Medical Use of Marijuana Program Trip Ticket

The following information is required as proof of authorized conduct anytime a registered caregiver, registered dispensary, marijuana testing facility, or manufacturing facility transports marijuana or marijuana products for medical use. This form must accompany the marijuana or marijuana products.

Pursuant to 22 M.R.S. §2430-G, a registered caregiver, a registered dispensary, a marijuana testing facility, and a manufacturing facility shall keep a record of transfers of marijuana and marijuana products. All books and records maintained by the registered caregiver, registered dispensary, marijuana testing facility, or manufacturing facility must be kept for a period of seven years.

A registered caregiver, registered dispensary, marijuana testing facility, or manufacturing facility transporting marijuana or marijuana products must carry three copies of this Trip Ticket during the transportation of marijuana or marijuana product to another registrant or separate registered location. One copy must be provided to the receiving registrant. One copy must be kept by the transferring registrant for record keeping purposes. A final copy must be provided to law enforcement, if requested. For patient delivery, two copies are required. One copy must be kept by the transferring registrant for record keeping and a second copy must be provided to law enforcement, if requested.

SECTION 1: Transferring Registrant

This section must be completed by the transferring registrant.

Legal Name

Guy Sylvester

Registry Identification Card Number

IIC834

Legal Name of Registration Certificate Holder, if applicable

CatLab, LLC

Registration Certificate Number, if applicable

MTF368

SECTION 2: Receiving Patient or Registrant

This section must be completed anytime marijuana or marijuana products for medical use are transported, including patient delivery and when a registered caregiver, registered dispensary, marijuana testing facility, or manufacturing facility is transporting marijuana or marijuana products from one of its registered locations to a different registered location.

This section must be completed by the transferring registrant.

Patient Identification Number/Medical Certification Number (DO NOT LIST NAME)

OR

Legal Name

CatLab, LLC

Registration Identification Card Number

MTF368

Legal Name of Registration Certificate Holder, if applicable

Registration Certificate Number, if applicable

SECTION 3: Description of Marijuana or Marijuana Products Transported

For each item transported, provide the amount (weight or units), product type (flower, wax, cartridges, etc.), and strain or other further identifying information of the marijuana or marijuana products.

This section must be completed by the transferring registrant.

Please see attached