



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

## Certificate of Analysis

<b>Client Name</b>	Warren West Group LLC	<b>License Number</b>	GR687
<b>Address</b>	289 New Portland Rd. Gorham, Maine 04038	<b>Phone</b>	207-253-9796
<b>Order ID</b>	2064	<b>Sample Type</b>	Dried Flower
<b>Sample ID</b>	07573	<b>Strain</b>	PBB x Skittles
<b>METRC Sample ID</b>	1A40D0300004395000003156	<b>Serving Mass (g)/ Package</b>	/
<b>Date Received</b>	06/20/2023	<b>Collected Sample Weight</b>	22 g
<b>Date/Time of Collection</b>	06/20/2023 08:00 AM	<b>Collected By</b>	Warren West
		<b>Date Generated</b>	06/26/2023

### Summary of Results

Water Activity Profile	
All Results	Pass

Filth and Foreign Materials Screening	
All Results	Pass

Microbiological Screening	
All Results	Fail

Heavy Metals Screening	
All Results	Pass

Pesticides Screening	
All Results	Pass

Potency Profile	
Cannabinoid	Result mg/g
CBDV	< RL
THCV	< RL
CBDA	0.560
CBD	< RL
CBG	1.31
CBN	< RL
CBGA	8.88
CBC	< RL
exoTHC	< RL
$\Delta^9$ -THC	5.20
$\Delta^8$ THC	< RL
THCA	293
<b>Total Cannabinoids %</b>	30.9
<b>Total CBD mg/g</b>	0.491
<b>Total THC mg/g</b>	262
<b>Total CBD %</b>	0.0491
<b>Total THC %</b>	26.2

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### Potency

**Date Analyzed:** 6/23/23  
**Instrument:** UPLC CAT-0002/CAT-0151

**Prep Date:** 6/22/23  
**Method:** SOP-QA-0016

**Analyst:** KB/IG

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	0.0560	0.560	N/A	0.0101	0.101
CBD	< RL	< RL	N/A	0.0101	0.101
CBG	0.131	1.31	N/A	0.0101	0.101
CBN	< RL	< RL	N/A	0.0101	0.101
CBGA	0.888	8.88	N/A	0.0101	0.101
CBC	< RL	< RL	N/A	0.0101	0.101
exoTHC	< RL	< RL	N/A	0.0101	0.101
$\Delta^9$ -THC	0.520	5.20	N/A	0.0101	0.101
$\Delta^8$ THC	< RL	< RL	N/A	0.0101	0.101
THCA	29.3	293	N/A	0.0101	0.101

LCS failure, THC < 80% recovery, error in spike.

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		<b>Date Generated</b>	06/26/2023

### Pesticides

**Date Analyzed:** 6/22/23  
**Instrument:** CAT-0162

**Prep Date:** 6/21/23  
**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	Dimethoate	< RL	39.9	200	Pass
Acephate	< RL	55.6	400	Pass	Ethoprophos	< RL	33.9	200	Pass
Acequinocyl	< RL	1150	2000	Pass	Etofenprox	< RL	78.1	400	Pass
Acetamiprid	< RL	31.2	200	Pass	Etoazole	< RL	61.2	200	Pass
Aldicarb	< RL	31.2	400	Pass	Fenoxycarb	< RL	89.9	200	Pass
Azoxystrobin	< RL	33.2	200	Pass	Fenpyroximate	< RL	83.1	400	Pass
Bifenazate	< RL	31.2	200	Pass	Fipronil	< RL	112	400	Pass
Bifenthrin	< RL	96.5	200	Pass	Flonicamid	< RL	31.2	1000	Pass
Boscalid	< RL	42.9	400	Pass	Fludioxonil	< RL	62.5	400	Pass
Carbaryl	< RL	37.0	200	Pass	Hexythiazox	< RL	54.3	1000	Pass
Carbofuran	< RL	31.2	200	Pass	Imazalil	< RL	87.3	200	Pass
Chlorantraniliprole	< RL	92.2	200	Pass	Imidacloprid	< RL	39.8	400	Pass
Chlorfenapyr	< RL	919	1000	Pass	Kresoxim-methyl	< RL	53.6	400	Pass
Chlorpyrifos	< RL	74.5	200	Pass	Malathion	< RL	66.0	200	Pass
Clofentezine	< RL	56.7	200	Pass	Metalaxyl	< RL	56.4	200	Pass
Cyfluthrin	< RL	798	1000	Pass	Methiocarb	< RL	31.2	200	Pass
Cypermethrin	< RL	196	1000	Pass	Methomyl	< RL	31.2	400	Pass
Daminozide	< RL	329	1000	Pass	Methyl parathion	< RL	193	200	Pass
DDVP (Dichlorvos)	< RL	31.2	1000	Pass	MGK-264 <sup>2</sup>	< RL	70.2	200	Pass
Diazinon	< RL	55.3	200	Pass	Myclobutanil	< RL	37.3	200	Pass
					Naled	< RL	42.2	500	Pass

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### Pesticides

**Date Analyzed:** 6/22/23  
**Instrument:** CAT-0162

**Prep Date:** 6/21/23  
**Method:** SOP QA-0040

**Analyst:** LCH

Analyte	Finding (PPB)	LOQ (PPB)	Limit (PPB)	Pass/Fail
Oxamyl	< RL	31.2	1000	Pass
Paclobutrazol	< RL	52.5	400	Pass
Permethrin <sup>3</sup>	< 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 <sup>1</sup>	< RL	248	1000	Pass
Pyridaben	< RL	59.8	200	Pass
Spinosad <sup>4</sup>	< 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).
5. Abamectin is measured as cumulative residues of Abamectin B1a and Abamectin B1b (CAS #71751-41-2)

Note: QC samples presented analytes outside criteria in CCV (high bias for acequinocyl and abamectins), LCS (abamectins and prallethrin), and spiked matrix sample.

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### Heavy Metals

**Date Analyzed:** 6/26/23  
**Instrument:** CAT-0093

**Prep Date:** 6/22/23  
**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:** 6/20/23  
**Date Analyzed Bacteria:** 6/21/23  
**Instrument:** CAT-0140, CAT-0152

**Prep Date Ecoli/SLM:** 6/20/23  
**Date Analyzed Ecoli/SLM:** 6/21/23  
**Method:** SOP-QA-0028, SOP-QA-0038

**Prep Date Yeast and Mold:** 6/20/23  
**Date Analyzed Yeast and Mold:** 6/23/23  
**Analyst:** ITG/KW

Contaminants	Result (CFU/g)	RL (CFU/g)	Action Level (CFU/g)	Pass/Fail
Total Aerobic	< RL	100	100,000	Pass
Total Yeast/Mold	18000	100	10,000	Fail
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:** 6/23/23  
**Instrument:** Visual Inspection

**Prep Date:** 6/23/23  
**Method:** SOP-QA-0018

**Analyst:** JG/KB

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

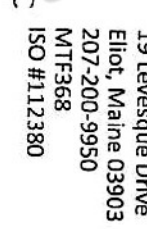
**Date Analyzed:** 6/23/23  
**Instrument:** Rotronic CAT-0020

**Prep Date:** 6/23/23  
**Method:** SOP-QA-0012

**Analyst:** JG/KB

Analyte	Finding (Aw)	RL (Aw)	Action Level (Aw)	Pass/Fail
Water Activity	0.45	0.11	0.65	Pass

Deisy Peña-Romero Lab Director



01/05/2064

Page \_\_\_\_ of \_\_\_\_

**Submittal Type**

Adult Use: ☒ R&D: ☐ Medical: ☐

Personal/Other: ☐

Analyses Requested	Analysis Results
1. <b>General Information</b>	1. <b>Case Identification:</b> The case is identified by the name of the patient, the date of admission, and the date of the analysis.
2. <b>History of Present Illness</b>	2. <b>Onset and Duration:</b> The patient reports the onset of symptoms on [date] and the duration of symptoms is [duration].
3. <b>Review of Systems</b>	3. <b>Cardiovascular:</b> The patient reports no chest pain, shortness of breath, or other cardiovascular symptoms.
4. <b>Physical Examination</b>	4. <b>Vital Signs:</b> The patient's vital signs are within normal limits.
5. <b>Diagnostic Tests</b>	5. <b>Imaging:</b> The patient has undergone a [test] which revealed [results].
6. <b>Pathophysiology</b>	6. <b>Pathophysiology:</b> The patient's symptoms are consistent with [condition].
7. <b>Management</b>	7. <b>Management:</b> The patient is being managed with [treatment].
8. <b>Prognosis</b>	8. <b>Prognosis:</b> The patient's prognosis is [prognosis].
9. <b>Conclusion</b>	9. <b>Conclusion:</b> The patient's symptoms are consistent with [condition].
10. <b>References</b>	10. <b>References:</b> The patient's symptoms are consistent with [condition].

Analyses Requested	
	le
	ents
	Sign Material
	al Impurities
	y
	id only
	ure (optional)

[illegible]

Comments, special instructions, or temperature requirements:

Received In Signature:

\*\*\*Potency analysis tests  $\Delta$ -9-THC, THCA, CBD, CBG, CBN, CBDA, THCV, CBDV, CBC, CBGA, exoTHC,  $\Delta$ -8-THC

Samples collected by (print): KIMBERLY JOHNSON  
Signature: \_\_\_\_\_

Signature:  Date: 6.20.2023

Received in field by (print):	
Signature:	

Date: \_\_\_\_\_  
Time: \_\_\_\_\_

Received at Lab by (print)

Date: \_\_\_\_\_

**Signature:**

Printed: Dr. Cecilia's Date: 6/20/2012  
SA, Theresa Time: 130 5:05

Time:

130 S: 55

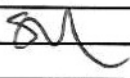




METRC®

**MARIJUANA TRANSPORTATION MANIFEST**

All sales transactions are to be completed prior to transportation of any MARIJUANA. The receiving entity may reject product delivered, but amount delivered must be limited to amount agreed upon in prior sales transaction.

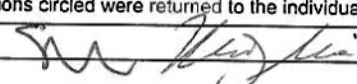
<b>Manifest No.</b>	<b>0000547313</b>	<b>Date Created</b>	<b>6/20/2023 10:30 AM</b>
<b>Originating Entity</b>	WARREN WEST GROUP, LLC		<b>For Agency Use Only</b>
<b>Originating License Number</b>	GR687		
<b>Address of Originating Entity</b>	289 NEW PORTLAND ROAD GORHAM, ME 04038 County: CUMBERLAND		
<b>Phone No. of Originating Entity</b>			
<b>1. Destination</b>	CATLAB, LLC	<b>Destination Phone No.</b>	
<b>Destination License Number</b>	TF368	<b>Date and Approx. Time of Departure</b>	6/20/2023 11:30 AM
<b>Address of Destination</b>	19 LEVESQUE DRIVE SUITES 3 AND 5 ELIOT, ME 03903-2079 County: YORK	<b>Date and Approx. Time of Arrival</b>	6/20/2023 12:30 PM
		<b>Date/Time Received</b>	6/26/23 1:30
<b>Route to be Traveled</b> 368 to pick up from 687. Planned route unknown.		<b>Notes:</b> details for extenuating circumstances (e.g., road closure, flat tire, etc.)	
<b>1. Outbound Transporter</b>	CATLAB, LLC	<b>No Layover Scheduled</b>	
<b>Transporter License Number</b>	TF368		
<b>Address of Transporter</b>	19 LEVESQUE DRIVE SUITES 3 AND 5 ELIOT, ME 03903-2079 County: YORK		
<b>Contact Phone No. for Inquiries:</b> 9789928439			
<b>Name of Person Transporting</b>	Sydney Noyes	<b>Employee ID of Driver</b>	IIC5642
<b>State Driver's License No.</b>	S9683341 (MA)	<b>Signature of Person Transporting</b>	
<b>Make, Model, License Plate No.</b>	Toyota RAV4 CATLAB	<b>Leg of Layover Trip</b>	
<b>1. Package   Shipped</b>	<b>Production Batch No.</b>	<b>Item Name</b>	<b>Quantity</b>
1A40D0300004395000003156 Lab Test: SubmittedForTesting		Harvest Batch_PBBxSkittles (Buds/Flower)	Shp: 22.0000 g
<b>Item Details</b>	Strain: Peanut Butter Breath x Skittles		
<b>Source Harvest</b>	HB19_2023.06.07_PBBxSkittles		
<b>Source Package(s)</b>	1A40D0300004395000003152		
<b>Source Production Batch</b>			
<b>Req'd Lab Test Batches</b>	Filt & Foreign Materials, Metals - Flower/Trim, Microbials - E.coli, Microbials - Enterobacteriaceae, Microbials - Salmonella, Microbials - Total Aerobic Microbial Count, Microbials - Total Coliform, Microbials - Total Yeast & Mold Count, Pesticides, Potency (Flower/Trim), Water Activity		
<b>2. Package   Shipped</b>	<b>Production Batch No.</b>	<b>Item Name</b>	<b>Quantity</b>
1A40D0300004395000003157 Lab Test: SubmittedForTesting		Harvest Batch_T-Sprinkles (Buds/Flower)	Shp: 22.0000 g
<b>Item Details</b>	Strain: Titty Sprinkles		
<b>Source Harvest</b>	HB19_2023.06.07_Titty Sprinkles		
<b>Source Package(s)</b>	1A40D0300004395000003153		
<b>Source Production Batch</b>			
<b>Req'd Lab Test Batches</b>	Filt & Foreign Materials, Metals - Flower/Trim, Microbials - E.coli, Microbials - Enterobacteriaceae, Microbials - Salmonella, Microbials - Total Aerobic Microbial Count, Microbials - Total Coliform, Microbials - Total Yeast & Mold Count, Pesticides, Potency (Flower/Trim), Water Activity		



METRC®

**MARIJUANA TRANSPORTATION MANIFEST**

All sales transactions are to be completed prior to transportation of any MARIJUANA. The receiving entity may reject product delivered, but amount delivered must be limited to amount agreed upon in prior sales transaction.

<b>Manifest No.</b>	<b>0000547313</b>	<b>Date Created</b>	<b>6/20/2023 10:30 AM</b>
<b>3. Package   Shipped</b>	<b>Production Batch No.</b>	<b>Item Name</b>	<b>Quantity</b>
1A40D0300004395000003158 Lab Test: SubmittedForTesting		Harvest Batch_Mimosa (Buds/Flower)	Shp: 22.0000 g
<b>Item Details</b>	Strain: Mimosa		
<b>Source Harvest</b>	HB19_2023.06.07_Mimosa		
<b>Source Package(s)</b>	1A40D0300004395000003154		
<b>Source Production Batch</b>			
<b>Req'd Lab Test Batches</b>	Filth & Foreign Materials, Metals - Flower/Trim, Microbials - E.coli, Microbials - Enterobacteriaceae, Microbials - Salmonella, Microbials - Total Aerobic Microbial Count, Microbials - Total Coliform, Microbials - Total Yeast & Mold Count, Pesticides, Potency (Flower/Trim), Water Activity		
<b>4. Package   Shipped</b>	<b>Production Batch No.</b>	<b>Item Name</b>	<b>Quantity</b>
1A40D0300004395000003159 Lab Test: SubmittedForTesting		Harvest Batch_Killer Queen (Buds/Flower)	Shp: 22.0000 g
<b>Item Details</b>	Strain: Killer queen		
<b>Source Harvest</b>	HB19_2023.06.07_Killer Queen		
<b>Source Package(s)</b>	1A40D0300004395000003155		
<b>Source Production Batch</b>			
<b>Req'd Lab Test Batches</b>	Filth & Foreign Materials, Metals - Flower/Trim, Microbials - E.coli, Microbials - Enterobacteriaceae, Microbials - Salmonella, Microbials - Total Aerobic Microbial Count, Microbials - Total Coliform, Microbials - Total Yeast & Mold Count, Pesticides, Potency (Flower/Trim), Water Activity		
<b>PRODUCT REJECTION (if only a portion of shipment is rejected, circle that portion above)</b>			
<b>Name of Person Receiving or Rejecting Product</b>	Joe Geddes		
I confirm that the contents of this shipment match weight records entered above, and I agree to take custody of those portions of this shipment <i>not</i> circled above. Those portions circled were returned to the individual delivering this shipment.			
<b>Signature</b>		<b>Date</b>	6/20/23
<b>Signature of individual taking receipt of rejected portion of this shipment</b>			

# Sample Receipt Condition Report

CATLAB, LLC

Order ID: 2069

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	<u>2/</u>	<u>4/</u>	
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 checked="" type="checkbox"/> Y / <input type="checkbox"/> N / <input type="checkbox"/> NA	Comments:
Sample tampered, manipulated, adulterated or contaminated?	<input checked="" type="checkbox"/> Y / <input checked="" type="checkbox"/> N / <input type="checkbox"/> NA	Comments:
AUMP Sample size by Batch Size OK?	<input checked="" type="checkbox"/> Y / <input type="checkbox"/> N / <input type="checkbox"/> NA	Comments:
Samples collected in the manner required by OMP?	<input checked="" type="checkbox"/> Y / <input type="checkbox"/> N / <input type="checkbox"/> NA	Comments:
Transport Manifest Received?	<input checked="" type="checkbox"/> Y / <input type="checkbox"/> N / <input type="checkbox"/> NA	Comments:
Samples Received in Metric?	<input checked="" type="checkbox"/> Y / <input type="checkbox"/> N / <input type="checkbox"/> NA	Comments:

Notes/Comments:

Initials/Date: FE 6/20/23

## 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 Metric
  - ☐ Transfer Manifest
- If CATLAB Samples:
- ☐ Sampling Form
  - ☐ Attestation Form

Initials: FE Date: 6/23/23