



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

Certificate of Analysis

Client Name	Highbrow Industries LLC - Manufacturing	License Number	AM544
Address	55 Topsham Fair Mall Rd. Topsham, ME 04086	Phone	(207) 356-9377
Order ID	2144	Sample Type	Semi-solid edibles
Sample ID	07869	Strain	MB Gummy S: 17263
METRC Sample ID	1A40D0300001451000017323	Serving Mass (g)/ Package	5.9297 / 10
Date Received	07/18/2023	Collected Sample Weight	13 ea
Date/Time of Collection	07/18/2023 09:00 AM	Collected By	Highbrow
		Date Generated	07/25/2023

Summary of Results

Water Activity Profile	
All Results	Pass

Filth and Foreign Materials Screening	
All Results	Pass

Microbiological Screening	
All Results	Pass

Heavy Metals Screening	
All Results	Pass

Homogeneity Profile	
%RSD THC	26.7
%RSD CBD	N/A
Pass/Fail	Fail
Pass/Fail Limit is 15%	

Potency Profile	
Cannabinoid	Result mg/g
CBDV	< RL
THCV	< RL
CBDA	< RL
CBD	< RL
CBG	0.0552
CBN	0.0253
CBGA	< RL
CBC	< RL
exoTHC	< RL
Δ9-THC	1.50
Δ8THC	< RL
THCA	< RL
Total CBD mg/g	<RL
Total THC mg/g	1.50 Pass
Total CBD (mg/serving)	<RL
Total CBD (mg/package)	<RL
Total THC (mg/serving)	8.89
Total THC (mg/package)	88.9

Edibles Total THC Uncertainty: +/- 5.0% for 10mg Serving or 100mg Package

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Homogeneity

Date Analyzed: 7/19/23
Instrument: UPLC CAT-0002

Prep Date: 7/18/23
Method: SOP-QA-0014

Analyst: RW

Analyte	Finding (mg/g)
Total THC Replicate 1	1.50
Total THC Replicate 2	1.72
Total THC Replicate 3	0.989
%RSD THC	26.7

CN1 CCV failure for all compounds due to misinjection. A new aliquot of CN1 CCV was prepared and passed.

Potency

Date Analyzed: 7/19/23
Instrument: UPLC CAT-0002/CAT-0151

Prep Date: 7/18/23
Method: SOP-QA-0016

Analyst: RW

Potency	Result %	Result (mg/g)	Result (mg/serving)	Result (mg/package)	RL (mg/g)
CBDV	< RL	< RL	N/A	N/A	0.0244
THCV	< RL	< RL	N/A	N/A	0.0244
CBDA	< RL	< RL	N/A	N/A	0.0244
CBD	< RL	< RL	N/A	N/A	0.0244
CBG	0.00552	0.0552	0.327	3.27	0.0244
CBN	0.00253	0.0253	0.150	1.50	0.0244
CBGA	< RL	< RL	N/A	N/A	0.0244
CBC	< RL	< RL	N/A	N/A	0.0244
exoTHC	< RL	< RL	N/A	N/A	0.0244
Δ 9-THC	0.150	1.50	8.89	88.9	0.0244
Δ 8THC	< RL	< RL	N/A	N/A	0.0244
THCA	< RL	< RL	N/A	N/A	0.0244

CN1 CCV failure for all compounds due to misinjection. A new aliquot of CN1 CCV was prepared and passed.

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Heavy Metals

Date Analyzed: 7/19/23
Instrument: CAT-0093

Prep Date: 7/18/23
Method: SOP-QA-0030

Analyst: ITG

Metals	Result (ug/kg)	RL (ug/kg)	Action Level (ug/kg)	Pass/Fail
Arsenic	< RL	44.0	1500	Pass
Cadmium	< RL	91.9	500	Pass
Lead	< RL	32.3	500	Pass
Mercury	< RL	5.89	3000	Pass

Microbial Analysis

Prep Date Bacteria: 7/18/23
Date Analyzed Bacteria: 7/19/23
Instrument: CAT-0140, CAT-0152

Prep Date Ecoli/SLM: 7/18/23
Date Analyzed Ecoli/SLM: 7/19/23
Method: SOP-QA-0028, SOP-QA-0038

Prep Date Yeast and Mold: 7/18/23
Date Analyzed Yeast and Mold: 7/21/23
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	100	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: 07/24/23
Instrument: Visual Inspection

Prep Date: 07/24/23
Method: SOP-QA-0018

Analyst: 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

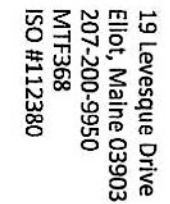
Date Analyzed: 07/24/23
Instrument: Rotronic CAT-0020

Prep Date: 07/24/23
Method: SOP-QA-0012

Analyst: JG

Analyte	Finding (Aw)	RL (Aw)	Action Level (Aw)	Pass/Fail
Water Activity	0.82	0.11	0.85	Pass

Deisy Peña-Romero Lab Director



Order 2144

Page of

Submittal Type

Adult Use: ☒ R&D: ☐ Medical: ☐

Personal/Other: ☐

[illegible]

EXPEDITE POTENCY? HOWEVER!

****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

**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):	<i>Andrew Mares</i>
Signature:	<i>[Signature]</i>
Date:	<i>7/18/23</i>
Received in field by (print):	
Date: <i>7/18</i>	
Signature:	<i>[Signature]</i>
Time: <i>1152</i>	
Received at Lab by (print):	
Date: <i>7/18/23</i>	
Signature:	<i>[Signature]</i>
Time: <i>1:40</i>	



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

Manifest No.	0000570907	Date Created	7/18/2023 9:11 AM
Originating Entity	HIGHBROW INDUSTRIES LLC	For Agency Use Only	
Originating License Number	AM544		
Address of Originating Entity	55 TOPSHAM FAIR MALL RD TOPSHAM, ME 04086-1729 County: SAGadahoc		
Phone No. of Originating Entity			
1. Destination	CATLAB, LLC	Destination Phone No.	
Destination License Number	TF368	Date and Approx. Time of Departure	7/18/2023 2:00 PM
Address of Destination	19 LEVESQUE DRIVE SUITES 3 AND 5 ELIOT, ME 03903-2079 County: YORK	Date and Approx. Time of Arrival	7/18/2023 3:00 PM
		Date/Time Received	7/18 1152
Route to be Traveled Get on I-295 S from Topsham Fair Mall Rd and ME-196 W/Lewiston Rd 4 min (1.2 mi) Head southeast 92 ft Turn left toward Topsham Fair Mall Rd 404 ft Turn right toward Topsham Fair Mall Rd 79 ft Turn left onto Topsham Fair Mall Rd 0.2 mi Use the left 2 lanes to turn left onto ME-196 W/Lewiston Rd 0.4 mi Turn left to merge onto I-295 S 0.5 mi Follow I-295 S and I-95 S to ME-236 N in Kittery. Take exit 2 from I-95 S 1 hr 4 min (73.2 mi) Merge onto I-295 S Toll road 31.0 mi Merge onto I-95 S Toll road 41.6 mi Take exit 2 for ME-236 toward US-1/Kittery 0.5 mi Follow ME-236 N to your destination in Eliot 4 min (2.2 mi) Turn left onto ME-236 N (signs for Eliot/S. Berwick) 2.1 mi		Notes: details for extenuating circumstances (e.g., road closure, flat tire, etc.)	



METRC®

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Manifest No.	0000570907	Date Created	7/18/2023 9:11 AM
Turn left onto Levesque Dr			
Turn left			
Turn left			
Turn left			
Turn left			
ATLAB LLC 10 Levesque Dr, Eliot, ME 03903			
1. Outbound Transporter	HIGHBROW INDUSTRIES LLC	No Layover Scheduled	
Transporter License Number	AM544		
Address of Transporter	55 TOPSHAM FAIR MALL RD TOPSHAM, ME 04086-1729 County: SAGadahoc		
Contact Phone No. for Inquiries: 2074022904			
Name of Person Transporting	Sydney Noyes	Employee ID of Driver	IIC5641
State Driver's License No.	MA S9683341	Signature of Person Transporting	
Make, Model, License Plate No.	TOYOTA RAV4 CATLAB	Leg of Layover Trip	
1. Package I Shipped	Production Batch No.	Item Name	Quantity
1A40D0300001451000017323 Lab Test Submitted For Testing		GUMMIES-BERRY (Edible (Solid))	Shp: 13.0000 ea
Item Details			
Source Harvest	1020222 Grease Monkey Manicure, 102321_GREASE_MONKEY_MB		
Source Package(s)	1A40D0300001451000017263		
Source Production Batch	MB009		
Regr'd Lab Test Batches	Filth & Foreign Materials, Homogeneity, Metals - Ingestion/Suppository, Microbials - E.coli, Microbials - Enterobacteriaceae, Microbials - Salmonella, Microbials - Total Aerobic Microbial Count, Microbials - Total Coliform, Microbials - Total Yeast & Mold Count, Potency (Infused), Water Activity		
PRODUCT REJECTION (if only a portion of shipment is rejected, circle that portion above)			
Name of Person Receiving or Rejecting Product			
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 not circled above. Those portions circled were returned to the individual delivering this shipment.			
Signature		Date	7/18
Signature of individual taking receipt of rejected portion of this shipment			

Sample Receipt Condition Report

CATLAB, LLC

Order ID: 2144

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			
Trim			
Pre-Roll			
Infused Pre-Roll			
Retail Units			
Concentrate			
Infused Edibles	<u>1</u>	<u>3</u>	<u>Rush POT / 1.6m</u>
Solid Batch			
Liquid Batch			

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

Initials/Date: CE 7/18/23

Notes/Comments:

Reviewer's Checklist	
<input checked="" type="checkbox"/> Client ID/Contact <input checked="" type="checkbox"/> Reporting Instructions <input checked="" type="checkbox"/> Rushes Communicated <input checked="" type="checkbox"/> Temp, Condition OK <input checked="" type="checkbox"/> Sample ID/Date/Time <input checked="" type="checkbox"/> Matrix <input checked="" type="checkbox"/> TAT Correct <input checked="" type="checkbox"/> Correct Analyses	<p>If Adult Use:</p> <input checked="" type="checkbox"/> Logged in Metrc <input checked="" type="checkbox"/> Transfer Manifest <p>If CATLAB Samples:</p> <input type="checkbox"/> Sampling Form <input type="checkbox"/> Attestation Form
Initials: <u>EG</u> Date: <u>7/19/23</u>	