

CATLAB, LLC

19 Levesque Dr. #3 Eliot, ME 03903 207-200-9950

ME OCP: MTF368

Certificate of Analysis

Client Name Cultivators Unlimited

Address 176 Main St.

South Portland, ME

04106

Order ID 2159

Sample ID 07918

METRC Sample ID

Date Received 07/21/2023

Date/Time of 07/21/2023 12:00 PM Collection

License Number GR773

Phone 207-835-9979

Dried Flower Sample Type

Tahoe OG Strain

Serving Mass (g)/

Package

Collected Sample Weight 2.5g

Cultivators **Collected By**

Unlimited

Date Generated 07/27/2023

Summary of Results

Microbiological	Screening
All Results	Pass

Heavy Metals S	creening
All Results	Fail



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Date Generated 07/27/2023

Heavy Metals

Date Analyzed: 7/27/23 Prep Date: 7/25/23

Instrument: CAT-0093 Method: SOP-QA-0030 Analyst: ITG

Metals	Result (ug/kg)	RL (ug/kg)	Action Level (ug/kg)	Pass/Fail
Arsenic	660	84.7	200	Fail
Cadmium	< RL	55.9	200	Pass
Lead	< RL	24.7	500	Pass
Mercury	< RL	4.89	100	Pass

Microbial Analysis

Prep Date Bacteria: NA Date Analyzed Bacteria: NA Instrument: CAT-0140, CAT-0152

Prep Date Ecoli/SLM: NA Date Analyzed Ecoli/SLM: NA

Method: SOP-QA-0028, SOP-QA-0038

Prep Date Yeast and Mold: 07/24/23 Date Analyzed Yeast and Mold: 7/27/23

Analyst: KW

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



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Deisy Peña-Romero Lab Director

CATLAB, LLC CHAIN OF CUSTODY RECORD

CATIAB, LIC 1

19 Levesque Drive Eliot, Maine 03903 207-200-9950 MTF368 ISO #112380

Email Address (for results): thomas jpatrick 1991 @ gazail.com Report To: Cultivator or Mfg Name: 5 るする GR773

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	Page of

1/21	Adult Use:	is
Personal/Other: _	R&D:	Submital Type
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omments, spec										21186		7717	The same	Sample Number (lab use only)	Sib Code: 501 - 82	Address: [
omments, special Instructions, or temperature requirements:	· 一般の など を できる									Talor 06 140		Green Markey	Crown Alexander	Sample Identification (as found on container)	Sib Code: 501 - 838-84.14 Shows: 501 - 838-84.14	Address: 176 warn St.	s.
requirements							3.94			How	és l	- Track	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Sample Type*	Cultivator or	Billing Addr	New Custome
S										7/21		7/21	- H /m -	Date Collected	Cultivator or Mfg License or Reg Number:	Billing Address (if different):	New Customer Information
										12:00		7:00	17.43	Time Collected	or Reg Numbe	Ē.	3
								N.	,	2.55	,	7.1		Sample Size	37		
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L							7 - 7			1		1	/	Metals			Analyses Requested
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1	T				24.0 T			List.	2007	27/Apr		No.		Gender ID	Listan A		
	Y N			2325				1 70	180			17415		Hop Latent	Viroid (HE	(d)	
ſ		No.	The state of				1115		174					Percent Moi	sture (option	al)	

Sample types: flower, wet/frozen flower, trim, concentrate, CO₂/solvent based concentrate, edible, capsule, tincture, or 'other'

gnature: Date: Signature: Signatu	*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	Received in field by (print): Signature:	Date: Time:	103
Received at Lab by (print): by Gudd-5		Signature: CM	Time:	103
Date:		Received at Lab by (print):	De Gadd-5 Date:	3/5
		Signature:	Mrs Li Time:	اندا

Sample Receipt Condition Report

CATLAB, LLC	Sumple Receipt Condition Report					
Samples Received Via:	CATLAB Sampler/Courier Licenses Courier Order ID: 2159					
Custody Seals Present	CATLAB Sampler/Courier Licensee Certified Sampler and Intact on Transport Container: Yes No N/A Comments: and Intact on Sample Containers: Yes No N/A Comments:					
Type of submittel:	N/A Comments:Yes No N/A Comments:					
Receipt Temp:	WedicalAdult UseOther Comments:					
	Humidity: If needed, ice present? Y/N Ambient:					
	Samples Received					
Flower	# of Samples # of Containers Notes:					
Flower						
Trim						
Pre-Roll						
Infused Pre-Roll						
Retail Units						
Concentrate						
Infused Edibles						
Solid Batch						
Liquid Batch						
	Proper Sample Containers/Enough Sample? Y N / NA Comments:					
Α	nalysis Marked on COC Match Bottles Rec'vy D/ N / NA Comments:					
	Date/Time/ID on Samples Match COC2 V / N / NA Comments:					
	Rushes Communicates to analyst in writing? Y / N (NA) Comments:					
Sample tampered,	manipulated, adulterated or contaminated? Y / (IV) NA Comments:					
	AUMP Sample size by Batch Size OK? (V) / NA) Comments:					
Sample	s collected in the manner required by OMP? Y / N / NA Comments:					
	Transport Manifest Received? Y / N / NA/ Comments:					
Samples Received in Metro? Y/N NA Comments:						
Initials/Dates						
Notes/Comments: Initials/Date: 1/21/23						
11	1/1 20 2 1/					
9	481.00 A					
(Cli-110 /2	Reviewer's Checklist					
Client ID/Contact						
Reporting Instruction	0115					
Rushes Communica						
Temp, Condition Ok						
Sample ID/Date/Tin	ne If CATLAB Samples:					
Matrix	Sampling Form					
TAT Correct	Attestation Form					
Correct Analyses	Initials: 16 Date: 7/24/25					
	401					