



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

Certificate of Analysis

Client Name Highbrow Industries LLC - Manufacturing
Address 55 Topsham Fair Mall Rd.
Topsham, ME 04086
Order ID 3908
Sample ID 013464
METRC Sample ID 1A40D0300001451000033446
Date Received 12/03/2024
Date/Time of Collection 12/02/2024 12:00 PM

License Number AM544
Phone (207) 356-9377
Sample Type Edible
Strain FP 200 Drink test S:
33445
Serving Mass (g)/ Package 12.93 / 20
Collected Sample Weight 5 units
Collected By Highbrow Industries
Date Generated 12/09/2024

Summary of Results

Filth and Foreign Materials Screening

All Results **Pass**

Microbiological Screening

All Results **Pass**

Heavy Metals Screening

All Results **Pass**

Homogeneity Profile

%RSD THC 1.02

%RSD CBD N/A

Pass/Fail **Pass**

Pass/Fail Limit is 15%

Potency Profile

Cannabinoid	Result mg/g
CBDV	< RL
THCV	< RL
CBDA	< RL
CBD	< RL
CBG	0.0240
CBN	< RL
CBGA	< RL
CBC	< RL
exoTHC	< RL
Δ 9-THC	0.780
Δ 8THC	< RL
THCA	< RL
Total CBD mg/g	<RL
Total THC mg/g	0.780 Pass
Total CBD (mg/serving)	<RL
Total CBD (mg/package)	<RL
Total THC (mg/serving)	10.1
Total THC (mg/package)	202

Adult Use Cannabis Edible Products must not contain more than 11.5 mg of THC/serving and 215 mg of THC/package for passing regulatory testing as stated in Maine OCP Guidance for the Implementation of Increased Potency Per Package of Edible Products

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Address	55 Topsham Fair Mall Rd. Topsham, ME 04086	Phone	(207) 356-9377
Order ID	3908	Sample Type	Edible
Sample ID	013464	Strain	FP 200 Drink test S: 33445
METRC Sample ID	1A40D0300001451000033446	Serving Mass (g)/ Package	12.93 / 20
Date Received	12/03/2024	Collected Sample Weight	5 units
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		Date Generated	12/09/2024

Homogeneity

Date Analyzed: 12/9/24
Instrument: UPLC CAT-0002

Prep Date: 12/9/24
Method: SOP-QA-0014

Analyst: KB

Analyte	Finding (mg/g)
Total THC Replicate 1	0.780
Total THC Replicate 2	0.767
Total THC Replicate 3	0.781
%RSD THC	1.02

Potency

Date Analyzed: 12/9/24
Instrument: UPLC CAT-0002/CAT-0151

Prep Date: 12/9/24
Method: SOP-QA-0016

Analyst: KB

Potency	Result %	Result (mg/g)	Result (mg/serving)	Result (mg/package)	RL (mg/g)
CBDV	< RL	< RL	N/A	N/A	0.0226
THCV	< RL	< RL	N/A	N/A	0.0226
CBDA	< RL	< RL	N/A	N/A	0.0226
CBD	< RL	< RL	N/A	N/A	0.0226
CBG	0.00240	0.0240	0.310	6.21	0.0226
CBN	< RL	< RL	N/A	N/A	0.0226
CBGA	< RL	< RL	N/A	N/A	0.0226
CBC	< RL	< RL	< RL	< RL	0.0226
exoTHC	< RL	< RL	N/A	N/A	0.0226
Δ9-THC	0.0780	0.780	10.1	202	0.0226
Δ8THC	< RL	< RL	N/A	N/A	0.0226
THCA	< RL	< RL	N/A	N/A	0.0226

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Heavy Metals

Date Analyzed: 12/06/24 **Prep Date:** 12/06/24 **Analyst:** RdG
Instrument: CAT-0093 **Method:** SOP-QA-0030

Metals	Result (ug/kg)	RL (ug/kg)	Action Level (ug/kg)	Pass/Fail
Arsenic	< RL	87.5	1500	Pass
Cadmium	< RL	158	500	Pass
Lead	< RL	48.1	500	Pass
Mercury	< RL	6.63	3000	Pass

Microbial Analysis

Prep Date Bacteria: 12/03/24 **Prep Date Ecoli/SLM:** 12/03/24 **Prep Date Yeast and Mold:** 12/03/24
Date Analyzed Bacteria: 12/04/24 **Date Analyzed Ecoli/SLM:** 12/04/24 **Date Analyzed Yeast and Mold:** 12/6/24
Instrument: CAT-0140, CAT-0152 **Method:** SOP-QA-0028, SOP-QA-0038 **Analyst:** DB/DPR

Contaminants	Result (CFU/g)	RL (CFU/g)	Action Level (CFU/g)	Pass/Fail
Total Aerobic	< RL	100	100,000	Pass
Total Yeast/Mold	< RL	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

TEMPO Bact incubator was high by 0.5 C degrees during part of incubation time.

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Filth and Foreign Materials

Date Analyzed: 12/9/24
Instrument: Visual Inspection

Prep Date: 12/9/24
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

Deisy Peña-Romero Lab Director

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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.	0001022821		Date Created	12/2/2024 11:10 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.	
Invoice Number				
Destination License Number	TF368		Date and Approx. Time of Departure	12/2/2024 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	12/2/2024 8:00 PM
			Date/Time Received	12-2-24 516
Route to be Traveled see driver.			Notes: details for extenuating circumstances (e.g., road closure, flat tire, etc.)	
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	Dan Ross	Employee ID of Driver	JIC7805	
State Driver's License No.	ME5623102	Signature of Person Transporting		
Make, Model, License Plate No.	TOYOTA RAV4 CATLAB	Leg of Layover Trip		
1. Package 1 Shipped	Production Batch No.	Item Name	Quantity	
1A40D0300001451000033446 Lab Test: SubmittedForTesting		Fruit Punch 200 (Drink)	Shp: 5 ea	
Item Details	Vol: 8 fl oz			
Source Harvest	MRIB-02.05.24-HVST2, MRIB-05.29.24-HVST3			
Source Package(s)	1A40D0300001451000033445			
Source Production Batch	12/02/2024			
Req'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)			
PRODUCT REJECTION (if only a portion of shipment is rejected, circle that portion above)				
Name of Person Receiving or Rejecting Product	DANIEL J ROSS			
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.				
Signature			Date	12-2-24
Signature of individual taking receipt of rejected portion of this shipment				

State: ME
 12/2/2024 11:10:05 AM -05:00

Sample Receipt Condition Report

CATLAB, LLC

Order ID: 3908

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 R&D Other Comments: _____
 Storage Temperature: Ambient Fridge Freezer Comments: _____

Samples Received			
	# of Samples	# of Containers	Notes:
Flower			
Trim			
Pre-Roll			
Infused Pre-Roll			
Nano Powder/Emulsion			
Concentrate			
Infused Edibles	1	5	
Capsule			
Tincture			

Analyses Marked on COC?	<input checked="" type="checkbox"/> Y / <input type="checkbox"/> N / <input type="checkbox"/> NA	Comments:
Description 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:
Evidence of tampered, manipulated, adulterated or contaminated?	<input type="checkbox"/> Y / <input checked="" type="checkbox"/> N / <input type="checkbox"/> NA	Comments:
Sample weight within +/- 10%?	<input checked="" type="checkbox"/> Y / <input type="checkbox"/> N / <input type="checkbox"/> NA	Comments:
Transfer Manifest Received?	<input checked="" type="checkbox"/> Y / <input type="checkbox"/> N / <input type="checkbox"/> NA	Comments:
Samples Received in Metrc?	<input checked="" type="checkbox"/> Y / <input type="checkbox"/> N / <input type="checkbox"/> NA	Comments:

Initials/Date: RdG 12/3/24

Notes/Comments:

Reviewer's Checklist	
<input checked="" type="checkbox"/> Client ID/Contact	<p>If Adult Use:</p> <input checked="" type="checkbox"/> Logged in Metrc <input type="checkbox"/> Transfer Manifest Additional Documents? <input checked="" type="checkbox"/> Y / <input type="checkbox"/> N Comments: _____
<input checked="" type="checkbox"/> Rushes Communicated	
<input checked="" type="checkbox"/> Storage Temperature 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	
Initials: <u>RdG</u> Date: <u>12/4/24</u>	