

## CERTIFICATE of ANALYSIS



REPORT PREPARED FOR:

PROJECT#

LAB ID

RECEIVED DATE

REPORT DATE

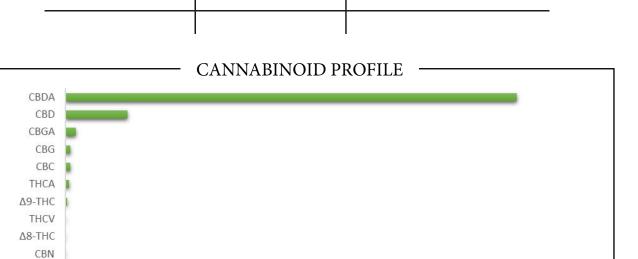


SAMPLE NAME:

CANNABINOID

**CBDV** 

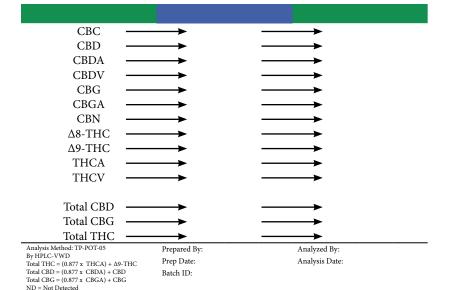
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APPROVED BY:

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LAB DIRECTOR

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SIGNATURE

SIGNED ON