Rogue Research Lab LLC Sample Request

Orelap ID: 4107 OLCC: 10105708B08

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Doc: WS-002 Rev. 3 Effective 12/8/18

Client	**Producer ID**	**# of batches in harvest lot**
Address	**Processor ID**	**# of Packages in harvest lot**
Contact	**Wholesaler ID**	**Project Name**
Phone	**Retailer ID**	**Reporting** ☐ **Email** ☐ **Fax**
Email **Fax**	**OMMP ID**	**Testing Reason: Check one** ☐ **Compliance** ☐ **R&D** ☐ **Retest**

Sampling Address
Sampling Directions if needed

Lab Use Only	**Strain/Name/Flower**	**Container(s) Description**	**METRC (container/Bag ID)**	**Potency**	**Water Act.**	**Pesticides**	**Solvents**	**Terpenes**	**Matrix (F)lower (C)oncentrate (E)dibble (T)opical**	Container I#'s

Analysis Requested (Check all appropriate)

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☐ Standard 7 day

☐ Rush 3 day (1.5X)

☐ Priority 2 day (2X)

Comments

Please email to: orders@rogueresearchlab.com

Submission of samples with testing requirements to Rogue Research Lab will be understood to be an agreement for services in accordance with the conditions available at sampling event.