

QA Contingency Manifest

The contingency manifest is to be used if CCRS is unable to produce the required manifest for movement of cannabis products within the I-502 market. When you complete the contingency manifest, the manifest must be sent to manifest@lcb.wa.gov. Once CCRS is working again, the license will need to submit the exact same information on a regular CCRS manifest. Any contingency manifest that is completed, requires the license to still complete a regular CCRS manifest, the contingency manifest is primarily to assist with the transportation of cannabis and should not be used in place of the primary CCRS manifest.

This contingency manifest can be used to transport Cannabis products to their destination. Completion and use of the contingency manifest meets the expectations as laid out in <u>WAC 314-55-085</u>. This does not meet a license's reporting responsibilities as outlined in <u>WAC 314-55-083</u>. To maintain those requirements, it is expected that the license will submit a Manifest.CSV to CCRS with the same information provided on the contingency manifest as soon as reasonably allowed by CCRS.

If a contingency manifest is used, the expectation is a primary CCRS will be completed as soon as possible, with the same Manifest ID. The LCB will perform checks to ensure any contingency manifest has a primary manifest uploaded to CCRS.

Date: 3/16/23 License #: 412217 Origin License Name: Phat N Sticky Licensee Phone: 5098791221 Licensee Address: 2611 N WOODRUFF RD STE A SPOKANE VALLEY, WA 992064138 Transportation License Information (complete only if using a Transporter) Licensee E-mail: Licensee F-mail: Licensee E-mail Licensee E-mail: Licensee Phone: Licensee B-mail: Licensee Phone: Samples Rec'd & Verified Date / Initials / Da		Transpor	tation Type: Standard Delivery			
Comparison Complete only if using a Transporter		Origin Licen	se information			
Licensee Address: 2811 N WOODRUFF RD STE A SPOKANE VALLEY, WA 952064138 Transportation License Information (complete only if using a Transporter) Licensee Name: Licensee E-mail: Licensee E-mail: Licensee Phone: Samples Rec'd & Verified Date / July / Suntials Departure Date/Time: mm/dd/yyyy hh:mm AM/PM Driver Name: Jessie Finch Diver & Vehicle Information Vin #: JTDEPRAE1LJ093092 Vehicle Licensee Plate: BSR7991 TransportManifest@phatnstick y.com TransportManifest@phatnstick y.c	Date:	3/16/23	License #:	412217		
Address: SPOKANE VALLEY, WA 992064138 Transportation License Information (complete only if using a Transporter) License Name: Licensee #: Licensee E-mail: Licensee Phone: Samples Rec'd & Verified Date 3 // u/3 Initials Departure Date/Time: mm/dd/yyyy hh:mm AM/PM Special Departure / Arrival Arrival Date/Time: mm/dd/yyyy hh:mm AM/PM Driver & Vehicle Information Driver Name: Jessie Finch VIN #: Vehicle License Plate: White	Origin License Name:	Phat N Sticky	Licensee Phone:	5098791221		
Transportation License Information (complete only if using a Transporter) Licensee Name: Licensee E-mail: Licensee Phone: Samples Rec'd & Verified Date 1		SPOKANE VALLEY, WA		, –,		
Licensee E-mail: Licensee E-mail: Licensee Phone: Samples Rec'd & Verified Date 3//46/23 Initials Departure Date/Time: mm/dd/yyyy hh:mm AM/PM Driver & Vehicle Information Driver Name: Jessie Finch Driver & Vehicle Color White						
Licensee E-mail: Licensee E-mail: Licensee Phone: Samples Rec'd & Verified Date 3//46/23 Initials Departure Date/Time: mm/dd/yyyy hh:mm AM/PM Driver & Vehicle Information Driver Name: Jessie Finch Driver & Vehicle Color White	Transport	tation License Information	(complete only if using a	Transporter)		
Samples Rec'd & Verified Date						
Departure Date/Time: mm/dd/yyyy hh:mm AM/PM Driver & Vehicle Information Driver Name: Vehicle License Plate: Departure / Arrival Date/Time: mm/dd/yyyy hh:mm AM/PM Arrival Date/Time: mm/dd/yyyy hh:mm AM/PM O3/17/2023 08:00 am O3/17/2023 08:00	Licensee E-mail:		Samples Rec'd & Veri Date 3/14/23 Initials			
Departure Date/Time: mm/dd/yyyy hh:mm AM/PM Driver & Vehicle Information Driver Name: Vehicle License Plate: D3/16/2023 11:30 am Arrival Date/Time: mm/dd/yyyy hh:mm AM/PM O3/17/2023 08:00 am		1000 10		· ()		
mm/dd/yyyy hh:mm AM/PM Driver & Vehicle Information Driver Name: Vehicle License Plate: DIVERAGE Driver & Vehicle Color White		Estimated De	<u> </u>			
Driver Name: Jessie Finch VIN #: JTDEPRAE1LJ093092 Vehicle License Plate: BSR7991 Vehicle Color White	mm/dd/yyyy hh:mm	03/16/2023 11:30 am	mm/dd/yyyy hh:mm	03/17/2023 08:00 am		
Driver Name: Jessie Finch VIN #: JTDEPRAE1LJ093092 Vehicle License Plate: BSR7991 Vehicle Color White						
Vehicle License Plate: BSR7991 Vehicle Color White		Driver & Vehi				
Venicle License Plate. Boxtool Venicle Color	Driver Name:	Jessie Finch				
Vehicle Make: Toyota Vehicle Model Corolla	Vehicle License Plate:	BSR7991				
	Vehicle Make:	Toyota	Vehicle Model	Corolla		

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Contingency Manifest

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Destination License Information					
Destination License Name:	Green Grower Labs #3242088918	Licensee Phone:			
Licensee Address:	124 E. Rowan Ave. Ste B Spokane, WA 99207	Licensee E-mail Address:	greengrowerlabs@gmail.com		

Travel Reminders

Per RCW 69.50.342 you must plan your route so that you remain within the State of Washington at all times. Per WAC 314-55-085(f) vehicle transporting cannabis or cannabis products must travel directly from the shipping licensee to the receiving licensee and must not make any unnecessary stops in between except to other facilities receiving product.

Transported Items

For Description, if InventoryExternalIdentifier, enter the following information related to the inventory:

ProductType

- InventoryType
- Description
- IsMedical
- WeightPerUnit
- ServingsPerUnit
- Externalldentifier (optional)

For Description, if PlantExternalIdentifier, then enter the following information related to the inventory:

- Strain
- Externalldentifier (optional)

Inventory ID / Plant ID	Description	Quantity	UoM
11623645671123530	Clear Oil - THC	2.00	Gram

Thr V 2 block persons of coales

Phat N Sticky		353¢				
Source		Sample ID		ONLY:		
Mixed Sample Name		P FGS B Sample Type	NON T	POT MICRO P	EST T LE	SE
Company of the Compan	Initials	Bertalen (1. 1 State Const. 1. 1 State				Initia
GENERAL ANALYSIS			LC/MsMs Re	esults		MH
Sample Mass (Whole):			Mycotoxins Total AF:	>		
Sample Mass (Trimmed):			Total AF: Total Och:			
Stems(%):			Pesticides (all non zero results	<u>1</u>	
IEH (ea):			Pyretr	Nrin I = 0	1.40 ppm	
Seeds or Other(%):			Pyieth	rin II = 0	.095 ppn	2
Water Activity:	IN	OUT		fotc1=0.	50 ppm	
POTENCY ANALYSIS	-65 r	mj			<u>'</u>	
тнс: 90						
THCA: <0.10						Initio
Max THC: 90			.			Initia
CBD: 3 2.7			Residuals			mA
CBDA: 0.12						
Max CBD: 2.8			Propane: C)	Hexanes:	0
Total Cannabinoids: 93	181	OUT	Butanes: ()	Ethyl Ace	tate: (
70	IN .	OUT	Cyclohexane	-	Chlorofo	2
MICRO SCREEN		35	Methanol: (A	Benzene:	
			Pentanes:		Heptane: Toluene:	1
BTGN: O			Ethanol: O Acetone: C	2	Xylenes:	
E. coli: 🕖			Isopropanol	(1)	Ayleries.	0
Salmonella Sp:				Chloride:		
Green						
Grower					mq	
	1000	COA	CCDS	Reviewe	d (LD or Des	ignee