

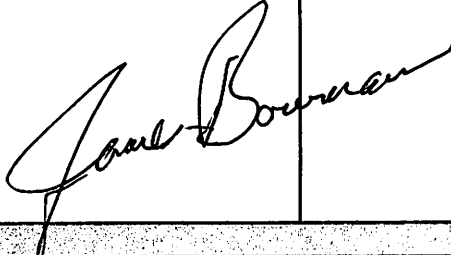


QA Contingency Manifest

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 WAC 314-55-085. This does not meet a license's reporting responsibilities as outlined in WAC 314-55-083. 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.

Transportation Type: Standard Delivery			
Origin License Information			
Date:	1/27/23	License #:	416538
Origin License Name:	DOGTOWN PIONEERS	Licensee Phone:	5092765659
Licensee Address:	4645 D N Swenson RD CLAYTON, WA 991109705	Licensee E-mail Address:	order@dogtownpioneers.com
Transportation License Information (complete only if using a Transporter)			
License Name:		Licensee #:	
Licensee E-mail:		Licensee Phone:	
			
Estimated Departure / Arrival			
Departure Date/Time: mm/dd/yyyy hh:mm AM/PM	01/27/2023 08:30 am	Arrival Date/Time: mm/dd/yyyy hh:mm AM/PM	01/28/2023 08:30 am
Driver & Vehicle Information			
Driver Name:	Jim Bowman	VIN #:	1HGEM21541L043967
Vehicle License Plate:	BMZ4080	Vehicle Color	Green
Vehicle Make:	Honda	Vehicle Model	Civic

Samples Rec'd & Verified
Date 1/27/23 Initials MB



Contingency Manifest

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
- ExternalIdentifier (optional)

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

- Strain
- ExternalIdentifier (optional)

Inventory ID / Plant ID	Description	Quantity	UoM
16133514918542742	Rays - Blood Orange Lemonade - 100mg	1.00	Each
16133516558952974	lil' Rays Cherry Lemonade - 100mg	1.00	Each

SOURCE: *Dogtown*SAMPLE NAME: *Blood Orange* SAMPLE#: *2742*DATE: *1/27/23*SAMPLE TYPE: *Liquid Edible* LOT#:

GENERAL ANALYSIS

Sample Mass (Whole) Grams:

Sample Mass (Trimmed) Grams:

% Stems:

Foreign Matter:

% Moisture:

Water Activity:

POTENCY ANALYSIS

THC: $0.25 \cdot 355 = 89 \text{ mg/nrf}$ THCA: <0.10

MaxTHC:

CBD: <0.10 CBDA: <0.10

MaxCBD:

Total Cannabinoids:

MICRO SCREEN

Yeast & Mold
~~Bile Tolerant Gram Negative:~~

E.Coli:

~~Salmonella Sp:~~
Aerobic

MYCOTOXINS

Total AF:

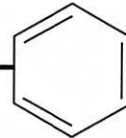
Total OCH:

Initials



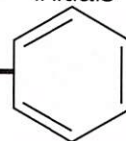
TERPENES NEEDED

Initials



RESIDUALS NEEDED

Initials



Propane:

Butanes:

Cyclohexane:

Methanol:

Pentanes:

Acetone:

Isopropanol:

Methylene Chloride:

Hexanes:

Ethyl Acetate:

Chloroform:

Benzene:

Heptane:

Toluene:

Xylenes:

CC ID:

GLOBAL / LAB ID:

LEAF

CC

Received / Accessioned

Uploaded / Checked / Sent

Results reviewed by
Lab Director or Designee

Initials

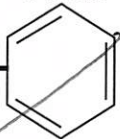


SOURCE: *Dogtown*SAMPLE NAME: *1il Cherry*SAMPLE#: *2974*DATE: *11/27/23*SAMPLE TYPE: *Liquid Edible*

LOT#:

GENERAL ANALYSIS

Initials



Sample Mass (Whole) Grams:

Sample Mass (Trimmed) Grams:

% Stems:

Foreign Matter:

% Moisture:

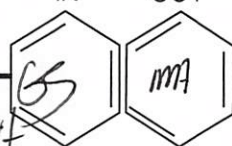
Water Activity:

POTENCY ANALYSIS

50 mL

IN

OUT

THC: *1.9* , *50* = *95* *mg/mL*THCA: *<0.10*

MaxTHC:

CBD: *<0.10*CBDA: *<0.10*

MaxCBD:

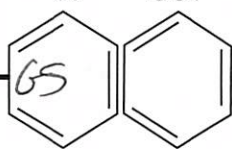
Total Cannabinoids:

MICRO SCREEN

165

IN

OUT

*Yeast + Mold*~~Bile Tolerant Gram Negative:~~

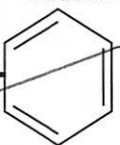
E.Coli:

Salmonella Sp:

Aerobic

MYCOTOXINS

Initials

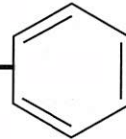


Total AF:

Total OCH:

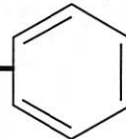
TERPENES NEEDED

Initials



RESIDUALS NEEDED

Initials



Propane:

Butanes:

Cyclohexane:

Methanol:

Pentanes:

Acetone:

Isopropanol:

Methylene Chloride:

Hexanes:

Ethyl Acetate:

Chloroform:

Benzene:

Heptane:

Toluene:

Xylenes:

CC ID:

GLOBAL / LAB ID:

LEAF

CC

Received / Accessioned	<i>[Signature]</i>	
Uploaded / Checked / Sent	<i>[Signature]</i>	
Results reviewed by Lab Director or Designee	<i>MA</i>	