

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.

| | Transpor | rtation Type: Standard Deliver | у |
|---|--|---|---------------------------|
| | Origin Licer | nse Information | |
| Date: | 2/17/23 | License #: | 415030 |
| Origin License Name: | Curations Corporation | Licensee Phone: | 239-822-8203 |
| Licensee Address: | 1802 N Langley St Spokane, WA 990069528 | Licensee E-mail Address: | Sorlando@curations502.com |
| Transport | ation License Information | (complete only if using | a Transporter) |
| License Name: | | Licensee #: | |
| Licensee E-mail: | ,E | Samples Rec'd & Ve | |
| | | | |
| | Estimated De | eparture / Arrival | |
| Departure Date/Time: mm/dd/yyyy hh:mm AM/PM | 02/17/2023 11:48 am | Arrival Date/Time: mm/dd/yyyy hh:mm AM/PM | 02/17/2023 05:00 pm |
| | | • | |
| | | icle Information | WAUWFAFC1JN031856 |
| Driver Name: | Ivan Rojas | VIN#: | Black |
| Vehicle License Plate: | BUX6227 | Vehicle Color | |
| Vehicle Make: | Audi | Vehicle Model | S7 Sportback |

 $(x,y) = x^{-1} \cdot x^{-1} + \dots + x^{-1} \cdot x^{-1} + \dots + x^{-1} \cdot x^{-1} = x^{-1} \cdot x^{-1} + \dots + x^{-1} = x$

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Samples Rec'd & Verilled

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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
- Externalldentifier (optional)

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

- Strain
- ExternalIdentifier (optional)

| Inventory ID / Plant ID | Description | Quantity | UoM | |
|-------------------------|--------------------------------|----------|------|--|
| 19023695960701546 | Bulk Flower Lot - Dirty Zprite | 8.00 | Gram | |
| 19023697111179314 | Bulk Flower Lot - Gummo | 8.00 | Gram | |

Full Panel + Terps plsi Thanks! Source

Sample ID

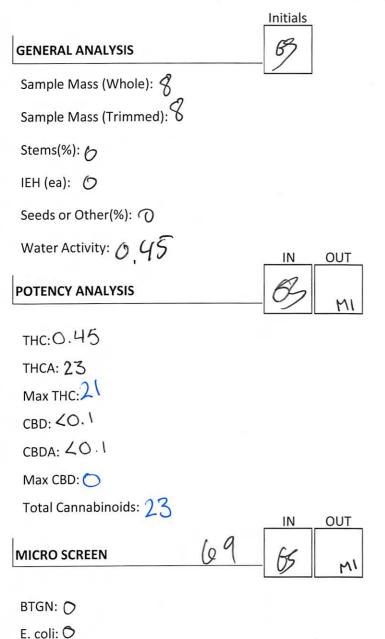


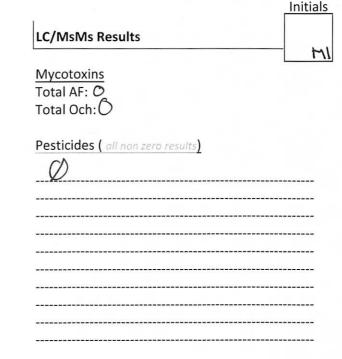




Sample Name

Sample Type







Xylenes:

Initials

Isopropanol:

Acetone:

Residuals

Methylene Chloride:



Salmonella Sp: ()

| 1 | 1 | | mq |
|------|-----|------|---------------------------|
| Json | CoA | CCRS | Reviewed (LD or Designee) |