

A & L CANADA LABORATORIES INC.

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CANNABIS LEAF TISSUE SUBMITTAL FORM & CHAIN OF CUSTODY

SUBMITTED BY:	ADDITIONAL INFORMATION					
Address:						
	Please email a copy of the analysis to:					
Province: Postal Code:						
Phone: Fax:						
Email:	EXPLANATION OF TEST PACKAGES					
	PT2 Nitrogen, Nitrate, Phosphorus, Potassium, Magnesium, Calcium, Sodium, Sulphur, Boron, Zinc, Manganese, Iron, Copper, Aluminum					
Account #:	other Silicon, Chloride, Molybdenum					

Item #	SAMPLE ID (20 characters max)	PMID Plant Monitoring Program Only	STRAIN	GROWTH STAGE	SAMPLE Sent (g)	WEIGHT		ANALYSIS	DATE SAMPLED	LAB NUMBER (for lab use only)
	(20 characters max)	Thank monitoring Trogram only		UTAGE	Sent (g)		PT2 Other:		DD/MM/YYYY	(for rab use only)
							PT2 Other:		DD/MM/YYYY	
							PT2 Other:		DD/MM/YYYY	
							PT2 Other:		DD/MM/YYYY	
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							PT2 Other:		DD/MM/YYYY	

CANNABIS PLANT GROWTH STAGES	NO ANALYTICAL WORK WILL BEGIN WITHOUT SIGNED AUTHORIZATION					
• Early Vegetative: CV1	Analysis Authorized By:	Date:	DD/MM/YYYY			
• Pre-Flower: CV2						
• Early Flower: CF1	Custody Relinquised By:	Date:	DD/MM/YYYY			
Late Flower: CF2						
• Harvest: CF3	Received by A&L:	Date:	DD/MM/YYYY			
Mature Non-Flowering: CVMAT						

Revised April 2020

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