

| Northern Rivers Botanical Testing Work Order |                                     |                  |
|----------------------------------------------|-------------------------------------|------------------|
| Customer Name                                |                                     | Date Received    |
| Mobile                                       |                                     | Date Harvested   |
| Email                                        |                                     |                  |
| Sample Type                                  | Oil   Flower   Edible   Balm   Feco | Other            |
| Sample Description                           |                                     |                  |
| Batch Number                                 |                                     | Manufacture Date |

Please Complete if Possible

|                                |                                      |
|--------------------------------|--------------------------------------|
| Likely strain of the product   |                                      |
| Carrier Oil Used               | Olive   Hemp   Mct   Coconut   Other |
| Ratio of oil to plant material |                                      |

Approximate Sample Size Required

|                |                                                                                                                                      |
|----------------|--------------------------------------------------------------------------------------------------------------------------------------|
| Plant material | size of a \$2 coin – Flower/ leaves must be as dry as possible or testing will be delayed to fully dry. ( intact – not broken down ) |
| Infused oil    | 3-5 mls                                                                                                                              |
| FECO           | 1-2g smear on baking paper - Rosin, Hash, Diamonds, Shatter, Isolate, Oil, BHO etc – clearly marked as what it is.                   |

**IMPORTANT** The more detailed information regarding the product (especially known ingredients in edibles / creams) the more detailed the results. Place the sample in a leakproof, zip lock bag with bubble wrap and discreet labelling. Please email or text Tracking Number when dispatched. [Northernriversbotanicaltesting@proton.me](mailto:Northernriversbotanicaltesting@proton.me)

**SEND TO** – Att; NRBT PO BOX 20581 Nimbin NSW 2480

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**For office use only**

|                                            |                  |
|--------------------------------------------|------------------|
| Weight of Empty Vial (g)                   |                  |
| Weight of Vial with Sample (g)             |                  |
| Starting Weight of Material (mg)           |                  |
| Sample Density                             |                  |
| Volume of Extraction Solvent (mL)/MeOH/ACN |                  |
| Aliquote of Extract (uL)                   |                  |
| Diluted into ACN (uL)                      |                  |
| Date of Analysis                           | SAMPLE<br>TAG ID |
| Analysis Type                              |                  |
| Cannabinoids / Terpenes                    |                  |