

Cannabis Chain of Custody Record

**Baseline
Laboratories**



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Lab # _____
Shaded areas for lab use only.

Company: _____
Address: _____
Phone: _____
E-Mail: _____
Contact: _____
Project: _____
License #: _____

Sample Type

- F: Flower
- P: Plant
- E: Edible
- O: Oil
- OT: Other

Analysis

Baseline Sample #	Client Sample Identification	Sample Type	Amount Submitted	Sampling Date	Analysis

Disposed of by: _____ Disposal Date: _____
Disposal Time: _____

Special Instructions/Comments:

Relinquished by:	Date:		Received by:	Date:	
	Time:			Time:	
Relinquished by:	Date:		Received by:	Date:	
	Time:			Time:	
Relinquished by:	Date:		Received by:	Date:	
	Time:			Time:	