Massachusetts Cannabis Control Commission

Independent Testing Laboratory

General Information:

License Number: IL281277

Original Issued Date: 06/06/2019

Issued Date: 10/08/2020

Expiration Date: 10/08/2021

ABOUT THE MARIJUANA ESTABLISHMENT

Business Legal Name: Green Analytics Massachusetts LLC

Phone Number: 617-721-3222 **Email Address:** eviolabsma@gmail.com

Business Address 1: 40 Speen St **Business Address 2:** Suite 301

Business City: Framingham **Business State:** MA **Business Zip Code:** 01701

Mailing Address 1: 40 Speen St **Mailing Address 2:** Suite 301

Mailing City: Framingham **Mailing State:** MA **Mailing Zip Code:** 01701

CERTIFIED DISADVANTAGED BUSINESS ENTERPRISES (DBES)

Certified Disadvantaged Business Enterprises (DBEs): Not a DBE

PRIORITY APPLICANT

Priority Applicant: no

Priority Applicant Type: Not a Priority Applicant

Economic Empowerment Applicant Certification Number:

RMD Priority Certification Number:

RMD INFORMATION

Name of RMD: We did not apply for RMD. Not sure why the status below is checked.

Department of Public Health RMD Registration Number:

Operational and Registration Status: Denied by DPH for Certificate of Registration as an RMD in Massachusetts

To your knowledge, is the existing RMD certificate of registration in good standing?: no

If no, describe the circumstances below: RMD Certificate does not apply to testing labs.

PERSONS WITH DIRECT OR INDIRECT AUTHORITY

Person with Direct or Indirect Authority 1

Percentage Of Ownership: 3.8 **Percentage Of Control:** 3.8

Role: Executive / Officer **Other Role:**

First Name: Lori **Last Name:** Glauser **Suffix:**

Gender: Female **User Defined Gender:**

What is this person's race or ethnicity?: White (German, Irish, English, Italian, Polish, French)

Specify Race or Ethnicity:

Person with Direct or Indirect Authority 2

Percentage Of Ownership: 4 **Percentage Of Control:** 4

Role: Executive / Officer **Other Role:**

First Name: William **Last Name:** Waldrop **Suffix:**

Gender: Male **User Defined Gender:**

What is this person's race or ethnicity?: White (German, Irish, English, Italian, Polish, French)

Specify Race or Ethnicity:

Person with Direct or Indirect Authority 3

Percentage Of Ownership: 0.1 **Percentage Of Control:** 0.1

Role: Manager **Other Role:**

First Name: James **Last Name:** Kocis **Suffix:**

Gender: Male **User Defined Gender:**

What is this person's race or ethnicity?: White (German, Irish, English, Italian, Polish, French)

Specify Race or Ethnicity:

ENTITIES WITH DIRECT OR INDIRECT AUTHORITY

Entity with Direct or Indirect Authority 1

Percentage of Control: 100 **Percentage of Ownership:** 100

Entity Legal Name: EVIO, Inc. **Entity DBA:** **DBA City:**

Entity Description: Laboratory Testing Company

Foreign Subsidiary Narrative:

Entity Phone: **Entity Email:** **Entity Website:** www.eviolabs.com

Entity Address 1: **Entity Address 2:**

Entity City: **Entity State:** **Entity Zip Code:**

Entity Mailing Address 1: **Entity Mailing Address 2:**

Entity Mailing City: **Entity Mailing State:** **Entity Mailing Zip Code:**

Relationship Description: EVIO, Inc acquired Viridis Analytics, LLC in total in 2017.

EVIO Inc. is a publicly traded company with over 7,000 shareholders. EVIO Inc. is managed by William Waldrop, CEO and Lori Glauser, COO.

CLOSE ASSOCIATES AND MEMBERS

No records found

CAPITAL RESOURCES - INDIVIDUALS

No records found

CAPITAL RESOURCES - ENTITIES

Entity Contributing Capital 1

Entity Legal Name: EVIO, Inc. **Entity DBA:**

Email: info@eviolabs.com **Phone:** 541-633-4133

Address 1: 62930 O.B. Riley Rd **Address 2:** Suite 300

City: Bend **State:** OR **Zip Code:** 97703

Types of Capital: Monetary/Equity **Other Type of Capital:** **Total Value of Capital Provided:** $471000 **Percentage of Initial Capital:** 100

Capital Attestation: Yes

BUSINESS INTERESTS IN OTHER STATES OR COUNTRIES

Business Interest in Other State 1

Business Interest of an Owner or the Marijuana Establishment: Business Interest of the Marijuana Establishment

Owner First Name: **Owner Last Name:** **Owner Suffix:**

Entity Legal Name: Smith Scientific Industries **Entity DBA:** EVIO Labs Medford

Entity Description: Oregon-licensed analytical testing lab.

Entity Phone: 541-668-7444 **Entity Email:** medford@eviolabs.com **Entity Website:** www.eviolabs.com

Entity Address 1: 540 E. Vilas Ave **Entity Address 2:** Suite F

Entity City: Central Point **Entity State:** OR **Entity Zip Code:** 97502 **Entity Country:** USA

Entity Mailing Address 1: 540 E. Vilas Ave **Entity Mailing Address 2:** Suite F

Entity Mailing City: Central Point **Entity Mailing State:** OR **Entity Mailing Zip Code:** 97502 **Entity Mailing Country:** USA

Business Interest in Other State 2

Business Interest of an Owner or the Marijuana Establishment: Business Interest of the Marijuana Establishment

Owner First Name: **Owner Last Name:** **Owner Suffix:**

Entity Legal Name: C3 Labs, LLC **Entity DBA:** EVIO Labs Berkeley

Entity Description: Analytical testing laboratory

Entity Phone: 541-633-4133 **Entity Email:** berkeley@eviolabs.com **Entity Website:** www.eviolabs.com

Entity Address 1: 2448 Sixth St. **Entity Address 2:**

Entity City: Berkeley **Entity State:** CA **Entity Zip Code:** 94710 **Entity Country:** USA

Entity Mailing Address 1: 2448 Sixth St. **Entity Mailing Address 2:**

Entity Mailing City: Berkeley **Entity Mailing State:** CA **Entity Mailing Zip Code:** 94710 **Entity Mailing Country:** USA

Business Interest in Other State 3

Business Interest of an Owner or the Marijuana Establishment: Business Interest of the Marijuana Establishment

Owner First Name: **Owner Last Name:** **Owner Suffix:**

Entity Legal Name: Greenhaus Analytical Labs **Entity DBA:** EVIO Labs Portland

Entity Description: Oregon-licensed Analytical Testing Lab

Entity Phone: 541-633-3846 **Entity Email:** portland@eviolabs.com **Entity Website:** www.eviolabs.com

Entity Address 1: 14775 SW 74th Ave **Entity Address 2:**

Entity City: Tigard **Entity State:** OR **Entity Zip Code:** 97224 **Entity Country:** USA

Entity Mailing Address 1: 14775 SW 74th Ave **Entity Mailing Address 2:** #117

Entity Mailing City: Tigard **Entity Mailing State:** OR **Entity Mailing Zip Code:** 97224 **Entity Mailing Country:** USA

Business Interest in Other State 4

Business Interest of an Owner or the Marijuana Establishment: Business Interest of the Marijuana Establishment

Owner First Name: **Owner Last Name:** **Owner Suffix:**

Entity Legal Name: Keystone Labs Inc. **Entity DBA:**

Entity Description: Health Canada licensed Analytical Testing Laboratory

Entity Phone: 780-916-9914 **Entity Email:** key@keystonelabs.ca **Entity Website:** https://keystonelabs.ca/

Entity Address 1: 7225 Roper Road NW **Entity Address 2:**

Entity City: Edmonton **Entity State:** Outside US **Entity Zip Code:** T6B 3J4 **Entity Country:** Canada

Entity Mailing Address 1: 7225 Roper Road NW **Entity Mailing Address 2:**

Entity Mailing City: Edmonton **Entity Mailing State:** Outside US **Entity Mailing Zip Code:** T6B 3J4 **Entity Mailing Country:** Canada

DISCLOSURE OF INDIVIDUAL INTERESTS

Individual 1

First Name: Lori **Last Name:** Glauser **Suffix:**

Marijuana Establishment Name: EVIO, Inc **Business Type:** Independent Testing Laboratory

Marijuana Establishment City: Henderson **Marijuana Establishment State:** NV

Individual 2

First Name: William **Last Name:** Waldrop **Suffix:**

Marijuana Establishment Name: EVIO, Inc **Business Type:** Independent Testing Laboratory

Marijuana Establishment City: Henderson **Marijuana Establishment State:** NV

MARIJUANA ESTABLISHMENT PROPERTY DETAILS

Establishment Address 1: 40 Speen St

Establishment Address 2: Suite 301

Establishment City: Framingham **Establishment Zip Code:** 01701

Approximate square footage of the Establishment: 5200 **How many abutters does this property have?:** 10

Have all property abutters have been notified of the intent to open a Marijuana Establishment at this address?: Yes

HOST COMMUNITY INFORMATION

Host Community Documentation:

Document Category	Document Name	Type	ID	Upload Date
Plan to Remain Compliant with Local Zoning	Framingham Zoning Documentation.pdf	pdf	5b5f5e2874dcfa349769ce90	07/30/2018
Certification of Host Community Agreement	HCA Certification Form.pdf	pdf	5b61c2a7fbbc11284d02edaa	08/01/2018
Community Outreach Meeting Documentation	Community Outreach Attestation.pdf	pdf	5b61c3471ccce4282510a7bc	08/01/2018

Total amount of financial benefits accruing to the municipality as a result of the host community agreement. If the total amount is zero, please enter zero and provide documentation explaining this number.: $1

PLAN FOR POSITIVE IMPACT

Plan to Positively Impact Areas of Disproportionate Impact:

Document Category	Document Name	Type	ID	Upload Date
Plan for Positive Impact	EVIO Impact Plan MA.pdf	pdf	5b621a77cfd7f028435e28b6	08/01/2018

ADDITIONAL INFORMATION NOTIFICATION

Notification: I Understand

INDIVIDUAL BACKGROUND INFORMATION

Individual Background Information 1

Role: **Other Role:**

First Name: William **Last Name:** Waldrop **Suffix:**

RMD Association: RMD Owner

Background Question: yes

Individual Background Information 2

Role: **Other Role:**

First Name: Lori **Last Name:** Glauser **Suffix:**

RMD Association: Not associated with an RMD

Background Question: yes

Individual Background Information 3

Role: **Other Role:**

First Name: James **Last Name:** Kocis **Suffix:**

RMD Association: Not associated with an RMD

Background Question: no

ENTITY BACKGROUND CHECK INFORMATION

Entity Background Check Information 1

Role: Parent Company **Other Role:**

Entity Legal Name: EVIO, Inc. **Entity DBA:**

Entity Description: Corporation

Phone: 541-633-4568 **Email:** info@eviolabs.com

Primary Business Address 1: 971 Coronado Drive **Primary Business Address 2:** Suite 200

Primary Business City: Henderson **Primary Business State:** NV **Principal Business Zip Code:** 89052

Additional Information:

MASSACHUSETTS BUSINESS REGISTRATION

Required Business Documentation:

Document Category	Document Name	Type	ID	Upload Date
Secretary of Commonwealth - Certificate of Good Standing	Evio Labs MA Business Certificate Exp. 082121 (2).pdf	pdf	5b072eb252bc563da3bfe679	05/24/2018
Articles of Organization	Viridis Analytics MA LLC Cert of Formation.pdf	pdf	5b61e4e0af8f7f28392e8bca	08/01/2018
Secretary of Commonwealth - Certificate of Good Standing	Viridis Analytics MA LLC Cert of Good Standing.pdf	pdf	5b61e4e164718b346fe273e4	08/01/2018

Bylaws	(a) Viridis Analytics, Inc. Charter-Copy (1).pdf	pdf	5b61e4e3cfd7f028435e282e	08/01/2018
Department of Revenue - Certificate of Good standing	3.1_EVIO Cert of Good Standing DOR MA.pdf	pdf	5bd88bfd4287b10d4f36e5ee	10/30/2018
Articles of Organization	3.1_3.4_EVIO Labs Domestic Entity Forms.pdf	pdf	5bd88d09fe03b20d5f69406b	10/30/2018

Certificates of Good Standing:

Document Category	Document Name	Type	ID	Upload Date
Department of Unemployment Assistance - Certificate of Good standing	MA UI Certificate of Good Standing 091720.pdf	pdf	5f63a2aee3e99907b865871d	09/17/2020
Department of Revenue - Certificate of Good standing	Viridis MA DOR CGS 091720.pdf	pdf	5f65011a7e8b3807d9e5d3ea	09/18/2020

Massachusetts Business Identification Number:

Doing-Business-As Name: Steep Hill Massachusetts

DBA Registration City: Framingham

BUSINESS PLAN

Business Plan Documentation:

Document Category	Document Name	Type	ID	Upload Date
Plan for Liability Insurance	EVIO Cert of Liability Insurance.pdf	pdf	5b61c622af8f7f28392e8b71	08/01/2018
Business Plan	EVIO_MA_Business and Operating Plan.pdf	pdf	5b6217d31ccce4282510a887	08/01/2018
Proposed Timeline	ViridisLicensingTimeline.pdf	pdf	5f6392429193d007a2192c59	09/17/2020

LABORATORY CERTIFICATION

Certifying Body: A2LA **ISO 17025 Accreditation Certificate Number:** 4162.01

OPERATING POLICIES AND PROCEDURES

Policies and Procedures Documentation:

Document Category	Document Name	Type	ID	Upload Date
Personnel policies including background checks	Personel Policies (Employee Handbook).pdf	pdf	5b5f67e5f002a22861568f7b	07/30/2018
Prevention of diversion	Prevention of Diversion (General Waste Disposal Procedures SOP.M.50.080).pdf	pdf	5b5f67f312ba8f281ff52683	07/30/2018
Qualifications and training	Qualifications and Training (Quality Mgmt System).pdf	pdf	5b5f681d1ccce4282510a5e5	07/30/2018
Inventory procedures	Inventory Procedures (Laboratory Sample Tracking SOP.T.20.021).pdf	pdf	5b5f68228a93fd282f3e379a	07/30/2018
Security plan	Security Plan (Security Procedures SOP.M.70.010).pdf	pdf	5b5f68b3fbbc11284d02ebde	07/30/2018
Storage of marijuana	Storage of Marijuana (Sample Handling, Storage	pdf	5b5f68b91bbb432857baa63d	07/30/2018

	and Preservation SOP.T.20.020).pdf			
Quality control and testing	Quality Control (Data Review and Reporting SOP.T.90.010.SBH).pdf	pdf	5b5f68bcf002a22861568f7f	07/30/2018
Quality control and testing	Quality control and Testing (Quality Mgmt System).pdf	pdf	5b5f68c90dfb4034a117ff5e	07/30/2018
Record Keeping procedures	Record Keeping Procedures (Document and Record Control Procedures SOP.QA.40.001).pdf	pdf	5b5f68cf5db774345fa896e2	07/30/2018
Transportation of marijuana	Transportation of Marijuana (Procedures for Sampling SOP.T.20.010 (includes transport)).pdf	pdf	5b5f68e364718b346fe271bd	07/30/2018
Restricting Access to age 21 and older	EVIO Labs Policy_Restricting Access to Minors.pdf	pdf	5b61f1b0cfd7f028435e284e	08/01/2018
Maintaining of financial records	EVIO Labs Policy_Maintenance of Financial Records.pdf	pdf	5b61f8e564718b346fe27430	08/01/2018
Diversity plan	EVIO Labs_MA_Diversity Plan.pdf	pdf	5b621baa9aeb1f3479545e6d	08/01/2018
Security plan	40 Speen 3rd Floor Cameras-Alarms.pdf	pdf	5b62256e8a93fd282f3e3a6c	08/01/2018
Security plan	3.10_EVIO_MA_Security Plan Rev 0.1.pdf	pdf	5bd88f834088250d697fc71f	10/30/2018
Transportation of marijuana	3.5 Transportation Plan.pdf	pdf	5bd8af24d84f77046ceec8b6	10/30/2018
Quality control and testing	3.6 Quality Control and Testing Plan.pdf	pdf	5bd8af2de18b8a04881dcbfa	10/30/2018
Record Keeping procedures	3.7-3.8 Record Keeping Procedures .pdf	pdf	5bd8af3982d97d04a0077451	10/30/2018
Qualifications and training	3.9 Staffing and Training Plan .pdf	pdf	5bd8af4f6427cd044e6279ad	10/30/2018
Quality control and testing	Viridis_ISO_Accred.pdf	pdf	5f65029c11982107a722ee73	09/18/2020

ATTESTATIONS

I certify that no additional entities or individuals meeting the requirement set forth in 935 CMR 500.101(1)(b)(1) or 935 CMR 500.101(2)(c)(1) have been omitted by the applicant from any marijuana establishment application(s) for licensure submitted to the Cannabis Control Commission.: I Agree

I understand that the regulations stated above require an applicant for licensure to list all executives, managers, persons or entities having direct or indirect authority over the management, policies, security operations or cultivation operations of the Marijuana Establishment; close associates and members of the applicant, if any; and a list of all persons or entities contributing 10% or more of the initial capital to operate the Marijuana Establishment including capital that is in the form of land or buildings.: I Agree

I certify that any entities who are required to be listed by the regulations above do not include any omitted individuals, who by themselves, would be required to be listed individually in any marijuana establishment application(s) for licensure submitted to the Cannabis Control Commission.: I Agree

Notification: I Understand

I certify that any changes in ownership or control, location, or name will be made pursuant to a separate process, as required under 935 CMR 500.104(1), and none of those changes have occurred in this application.: I Agree

I certify that to the best knowledge of any of the individuals listed within this application, there are no background events that have arisen since the issuance of the establishment's final license that would raise suitability issues in accordance with 935 CMR 500.801.: I Agree

I certify that all information contained within this renewal application is complete and true.: I Agree

ADDITIONAL INFORMATION NOTIFICATION

Notification: I Understand

COMPLIANCE WITH POSITIVE IMPACT PLAN

Progress or Success Goal 1

Description of Progress or Success: Our positive impact plan focuses on the following goals
o Use .5% of net revenue to support local events and community groups that align with this mission.
o Offer up to 25% discounts for EEA owned businesses for their first 2 years of operation and minimum of 15% after that.
o Become a partner or member of at least two organizations that work to directly support the needs of the disproportionately harmed community members.
o Commit to 64 hours of volunteer business and technology mentorship to EEA owned businesses during the first year, and up to 160 hours per year of volunteer mentorship in years following.
o Use .5% of net revenue to support students who excel in science in the STEM program.

Since the lab is not yet operating, the company has not yet received revenue, nor made sales, to support these goals or to support feed or expenses related to membership in organizations or reimburse employees for expenses related to volunteer mentorship. We anticipate to begin the program once the lab is operational and the company has revenue to support these intitiatives.

COMPLIANCE WITH DIVERSITY PLAN

Diversity Progress or Success 1

Description of Progress or Success: Viridis' initial employement goals are to achieve a workforce that is at least 50% female, and maintain a workforce that is at least 25% represented by LGBTQ, racial minorities, and veterans.

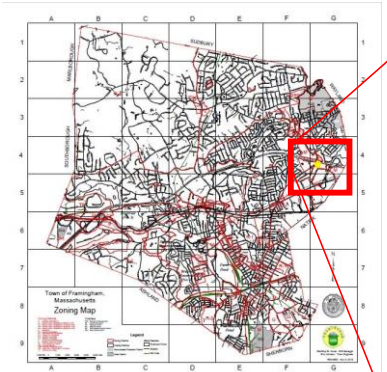
At this time, the lab has identified 5 employees. 40% are female, and 60% are racial minorities.

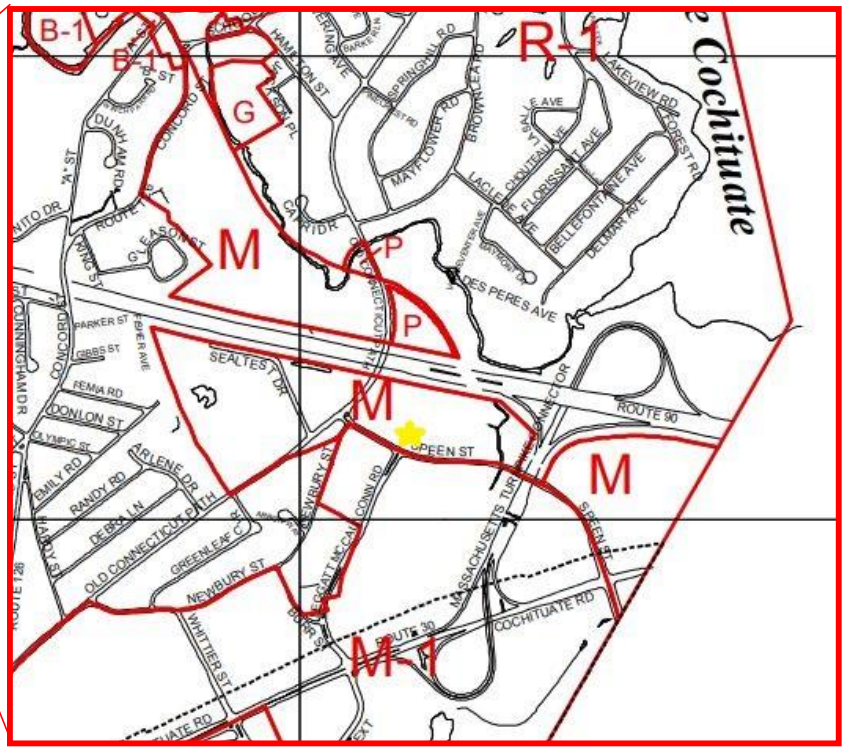
An updated diversity plan is attached.

HOURS OF OPERATION

Monday From: 8:00 AM	**Monday To:** 5:00 PM
Tuesday From: 8:00 AM	**Tuesday To:** 5:00 PM
Wednesday From: 8:00 AM	**Wednesday To:** 5:00 PM
Thursday From: 8:00 AM	**Thursday To:** 5:00 PM
Friday From: 8:00 AM	**Friday To:** 5:00 PM
Saturday From: Closed	**Saturday To:** Closed
Sunday From: Closed	**Sunday To:** Closed

Zoning Compliance
EVIO Labs, Inc
40 Speen St. Framingham MA 01701





USE CATEGORY	R	G	B-1[1]	B-2[2]	B-3 B-4[3]	CB[4]	B[3]	P[3]	PRD[5]	M-1[3]	M[3]	OSR[6]	TP[7]	Parking code
N. **Accessory Drive-thru for Fast Food Establishment or Pharmacy**	N	N	N	N	SPP	N	SPP	N	N	N	N	N	-	None
O. **Personal Health and Exercise Facility, or Health Club.**	N	N	N	Y	Y	Y	Y	N	N	Y	Y	N	-	6
P. **Gasoline service station**	N	N	N	N	SP	N	SP	N	N	N	N	N	N	21
Q. Parking facility	N	N	N	N	SPP	SPP	SPP	N	N	SPP	SPP	N	-	None
R. Radio or Television Studio	N	N	N	SP	SP	SP	Y	N	N	Y	Y	N	Y	24
T. **Carwash**	N	N	N	N	SPP	N	SPP	N	N	SPP	SPP	N	N	27
U. **Automobile Repair**	N	N	N	N	N	N	SP	N	N	N	N	N	N	21
V. **Automobile Dealer**	N	N	N	N	N	N	SP	N	N	N	N	N	N	22
W. **Motel**	N	N	N	N	SPP	N	SPP	N	N	SPP	SPP	N	N	4
X. **Hotel**	N	N	N	N	SPP	SPP	SPP	N	N	SPP	SPP	N	N	4
6. **MANUFACTURING AND INDUSTRIAL**														
A. **Research, Development & Laboratories**	N	N	N	SP	SP	SP	SP	N	N	Y	Y	N	Y	25
B. **Wholesale Business**	N	N	N	N	N	N	N	N	N	SPP	Y	N	N	24
C. Processing, assembly and manufacturing	N	N	N	N	N	N	N	N	N	SPP	Y	N	Y	25
D. **Commercial Dealers**	N	N	N	N	N	N	SP	N	N	SP	Y	N	SP	24

EVIO Labs, Inc

40 Speen St Framingham MA
617-721-3222
www.EVIOLabs.com

EVIO LABS

Host Community Agreement Certification Form

The applicant and contracting authority for the host community must complete each section of this form before uploading it to the application. Failure to complete a section will result in the application being deemed incomplete. Instructions to the applicant and/or municipality appear in italics. Please note that submission of information that is "misleading, incorrect, false, or fraudulent" is grounds for denial of an application for a license pursuant to 935 CMR 500.400(1).

Applicant

I, __William Waldrop_____, (insert name) certify as an authorized representative of __EVIO Labs, Inc._____ (insert name of applicant) that the applicant has executed a host community agreement with __Framingham, MA_____ (insert name of host community) pursuant to G.L.c. 94G § 3(d) on ___July 31, 2018_____ (insert date).

Signature of Authorized Representative of Applicant

Host Community

I, YVONNE M. SPICER, (insert name) certify that I am the contracting authority or have been duly authorized by the contracting authority for FRAMINGHAM, MA (insert name of host community) to certify that the applicant and FRAMINGHAM, MA (insert name of host community) has executed a host community agreement pursuant to G.L.c. 94G § 3(d) on July 31, 2018 (insert date).

Signature of Contracting Authority or Authorized Representative of Host Community

Cannabis Control Commission
COMMONWEALTH OF MASSACHUSETTS

Community Outreach Meeting Attestation Form

The applicant must complete each section of this form and initial each page before uploading it to the application. Failure to complete a section will result in the application being deemed incomplete. Instructions to the applicant appear in italics. Please note that submission of information that is "misleading, incorrect, false, or fraudulent" is grounds for denial of an application for a license pursuant to 935 CMR 500.400(1).

I, Cara Crabb Burnham, (*insert name*) attest as an authorized representative of EVIO Labs, Inc (*insert name of applicant*) that the applicant has complied with the requirements of 935 CMR 500 and the guidance for licensed applicants on community outreach, as detailed below.

1. The Community Outreach Meeting was held on 7/30/18 (*insert date*).

2. A copy of a notice of the time, place, and subject matter of the meeting, including the proposed address of the Marijuana Establishment, was published in a newspaper of general circulation in the city or town on 7/18/18 (*insert date*), which was at least seven calendar days prior to the meeting. A copy of the newspaper notice is attached as Attachment A (*please clearly label the newspaper notice in the upper right hand corner as Attachment A and upload it as part of this document).*

3. A copy of the meeting notice was also filed on 7/16/18 (*insert date*) with the city or town clerk, the planning board, the contracting authority for the municipality, and local licensing authority for the adult use of marijuana, if applicable. A copy of the municipal notice is attached as Attachment B (*please clearly label the municipal notice in the upper right-hand corner as Attachment B and upload it as part of this document*).

4. Notice of the time, place and subject matter of the meeting, including the proposed address of the Marijuana Establishment, was mailed on 7/16/18 (*insert date*), which was at least seven calendar days prior to the community outreach meeting to abutters of the proposed address of the Marijuana Establishment, and residents within 300 feet of the property line of the petitioner as they appear on the most recent applicable tax list, notwithstanding that the land of any such owner is located in another city or town. A copy of one of the notices sent to abutters and parties of interest as described in this section is attached as Attachment C (*please clearly label the municipal notice in the upper right hand corner as Attachment C and upload it as part of this document; please only include a copy of one notice and please black out the name and the address of the addressee*).

5. Information was presented at the community outreach meeting including:
    a. The type(s) of Marijuana Establishment to be located at the proposed address;
    b. Information adequate to demonstrate that the location will be maintained securely;
    c. Steps to be taken by the Marijuana Establishment to prevent diversion to minors;
    d. A plan by the Marijuana Establishment to positively impact the community; and
    e. Information adequate to demonstrate that the location will not constitute a nuisance as defined by law.

6. Community members were permitted to ask questions and receive answers from representatives of the Marijuana Establishment.

Attachments A

Baker hits Trump over 'disgraceful' comments

By Matt Murphy
State House News Service

BOSTON - Gov. Charlie Baker on Tuesday joined the chorus of Democrats and Republicans repudiating President Donald Trump over his performance at a summit with Russian President Vladimir Putin, as Trump sought to clarify that he accepts the U.S. conclusion of Russian interference in the 2016 election.

Baker called Trump's remarks in Helsinki where the president gave credence to Putin's denial of election meddling "disgraceful." In an interview in his office, Baker called it a "head-scratcher" why Trump would open the door to siding with Russia over his own national security advisers.

"I thought the president's commentary and his remarks with respect to U.S. intelligence and Russian meddling in the election were a disgrace and I found the entire line of commentary deeply disturbing coming two days after the Mueller investigation indicted, the Justice Department indicted, 12 Russians on charges that related exactly to this issue," Baker said.

Shortly after Baker rebuked the president, Trump spoke to reporters from the White House where he said he had misspoken during a press conference with Putin on Monday.

After the summit meeting, Trump had said Putin was "extremely strong and powerful in his denial" of election interference and added, "I don't see any reason why it would be" Russia that hacked Democratic computer networks.

On Tuesday, Trump said he reviewed his comments and wanted to clarify that he meant to say "wouldn't" instead of "would." He said U.S. intelligence agencies have his "full faith and support."

"I accept our intelligence community's conclusion that Russia's meddling in the 2016 election took place. Could be other people also. There's a lot of people out there. There was no collusion at all," Trump said before a meeting with Congressional leaders on tax reform. He also said the election interference had no impact on the results of his election.

The president's comments in Finland had triggered an avalanche of criticism, with Congressional leaders of both party's reaffirming their trust in American intelligence agencies and accusing Trump of kowtowing to Putin at the end of a trip to Europe where he tussled with traditional U.S. allies.

Baker told reporters on Monday afternoon that he was not familiar with what the president had said, but fully supported special prosecutor Robert Mueller's investigation into Russian interference in the last election and potential collusion between Trump's campaign and Moscow.

The governor then went home Monday night and watched the full press conference.

In an interview with the News Service, Baker said Trump should have stood behind the conclusions of his own intelligence agencies and the Justice Department that Russia, at the very least, tried to interfere in the election.

"On this particular issue, whether or not Russia sought to meddle in the U.S. election successfully or not, most people believe they did. Our intelligence officers believe they did, and I think it's disgraceful that the president didn't acknowledge that," Baker said.

Baker said that he felt the response from national leaders of his party to Trump had been "perfectly appropriate," but would not call on Republicans seeking office in Massachusetts, including the three GOP contenders for the U.S. Senate nomination, to disavow Trump's behavior.

"I don't like it necessarily when other people speak for me," he explained.

Baker's own primary challenger, Scott Lively, sent out an email to his campaign supporters giving Trump "two thumbs up" for his handling of the summit with Putin, suggesting the United States and Russia should be allies against Europe and the "Deep State."

Lively wrote about his travels through Russia as a preacher and said he found the Russian people to be "by far the closest in temperament and ideology to American conservatives."

"In fact, I am convinced that the primary purpose for the relentless anti-Russian propaganda we have endured from both the leftist and neocon media since Obama relaunched the Cold War in 2013 is to prevent American conservatives from learning that truth and teaming up with the Russians against the global socialist elites," Lively wrote.

Asked about Lively's message, Baker referred back to former Massachusetts governor and GOP presidential nominee Mitt Romney.

"Mitt Romney said many years ago that he thought Russia was the single biggest geopolitical threat to the United States and their presence in a variety of conflicts of one type or another have borne out much of what Mitt Romney said," Baker said.

The governor said he doesn't mind the idea of a U.S. president trying to engage with adversaries on the world stage, but believes it's possible to both stand up to someone like Putin over something like election meddling and try to find common ground.

"I think it's important for people to believe their elections are on the up and up and they aren't being tampered with by anyone, and in this particular instance there's a large body of evidence that at a minimum Russia tried to tamper with our election," Baker said. "This is a bedrock of democracy that we're talking about here, which I why I think it's important for elected officials and for others that represent this country to stand up and acknowledge that."

Trump said that he and Putin had spoken about the Middle East and the need for humanitarian aid in Syria, the need to control Iran and North Korea's pursuit of nuclear weapons, the security of Israel and the need to reduce global nuclear arsenals.

"I entered the meeting thinking diplomacy and engagement is better than hostility and conflict," Trump said, adding, "We have never been in a worse relationship with Russia than we were as of a few days ago and I think that has gotten substantially better."

The governor in 2016 did not vote for either Hillary Clinton or Trump, saying that he didn't believe Trump had the temperament to serve in the White House.

Asked how his assessment of the president might have evolved after Trump's 19 months in office, Baker said, "I haven't seen anything to change my mind."

EU, US relations sinking further after divisive tour

By Raf Casert
The Associated Press

BRUSSELS - After a week of the worst barrage of insults yet from U.S. President Donald Trump, the European Union is looking westward toward the White House less and less.

Making it worse, Trump spent Monday cozying up to EU adversary Vladimir Putin in an extraordinary chummy summit with the Russian leader in Helsinki.

Never mind. In an age when Trump has made political optics all-important, on Tuesday the EU struck back. Key EU leaders were in the far east in Japan and China looking for the trust, friendship and cooperation they could no longer get from a century-old ally.

Trump's embrace of Putin and the EU's Asian outreach highlight the yawning rift, widening more by the day, in a trans-Atlantic unity that has been the bedrock of international politics for the better part of a century, as countless graves of U.S. soldiers buried in European soil bear witness to.

Trump's abrasiveness and "America First" insistence had been a given even before he became president. Europe's increasing resignation to letting go of the cherished link to the White House is much more recent.

After last week's brutal NATO summit where Trump derided Europeans as freeloaders, EU chief Donald Tusk spoke on Tuesday of "the increasing darkness of international politics."

"This Helsinki summit is above all another wake-up call for Europe," said Manfred Weber, the German leader of the EPP center-right group in the European Parliament, the legislature's biggest.

"We Europeans must take our fate in our own hands."

It was a startling sentiment coming from someone who hails from the same German Christian Democrat stock as Angela Merkel, Helmut Kohl and Konrad Adenauer, staunch supporters of the trans-Atlantic link over the past three-quarters century.

There have been other signs of the growing European detachment from the White House, especially after Trump pulled out of the global climate agreement and the Iran nuclear deal the EU brokered.

"With friends like that, who needs enemies?" Tusk asked two months ago.

Soon, Trump had also piled on economic punishment with punitive tariffs on European steel and aluminum.

Then came the NATO summit. Already viewed with apprehension, reality turned out to be worse.

First, Trump called Germany, the powerhouse of the European Union, "captive" to Russia. Then he suggested that Britain should "sue" the EU over Brexit terms. Finally, he finished off by calling the 28-nation bloc a trade "foe."

"For Trump, the categories of friend, ally, partner, opponent, enemy don't exist. For him there is only his own ego," said the head of the German parliament's foreign affairs committee, Norbert Roettgen.

So little wonder the EU has turned for friends elsewhere — and found one Tuesday in Japan, where the bloc said it put in place "the largest bilateral trade deal ever."

Up to two years ago, that was supposed to be the Trans-Atlantic Trade and Investment Partnership, or TTIP, trade deal between the EU and the United States. But Trump quickly let it be known that such an international agreement would not happen on his watch.

Japanese Prime Minister Shinzo Abe, center, European Commission President Jean-Claude Juncker, left, and European Council President Donald Tusk, right, smile after their joint press conference of the Japan-EU summit Tuesday at Abe's official residence in Tokyo. [KOJI SASAHARA, POOL/THE ASSOCIATED PRESS]

Legal Notices

40 SPEEN ST/CANNABIS TESTING FACILITY

LEGAL NOTICE
NOTICE FOR COMMUNITY OUTREACH MEETING

Notice is hereby given that a Community Outreach Meeting for a proposed Marijuana Establishment is scheduled for 7/30/18 at 6:00-8:00 at Framingham City Hall, 150 Concord St # 129, Framingham, MA 01702, Blumer Room. The proposed Cannabis Testing Facility is anticipated to be located at 40 Speen St, Framingham. There will be an opportunity for the public to ask questions.

AD#13708737
MWDN 7/18/18

2018 FALL ANNUAL TOWN MEETING
LEGAL NOTICE
PUBLIC NOTICE

TOWN OF NATICK

BOARD OF SELECTMEN

The Board of Selectmen hereby gives public notice of its intention to call

2018 FALL ANNUAL TOWN MEETING

ON TUESDAY, OCTOBER 16, 2018

NATICK HIGH SCHOOL

7:30 P.M.

All articles requested for inclusion in the warrant for the 2018 Fall Annual Town Meeting must be received in the Office of the Board of Selectmen, Natick Town Hall, 13 East Central Street, Natick, Massachusetts by 5:00 p.m. on Thursday, August 16, 2018. The Board of Selectmen encourages petitioners and others submitting articles to provide such materials electronically to selectmen@natickma.org by such date and time; if submitting through this format, petitioners are advised to request a "read receipt" to verify proper and timely receipt by the Board of Selectmen's Office. The Board of Selectmen further encourages that articles be submitted in narrative format only, and that maps and other supplementary material not be included as part of the warrant article.

Michael J. Hickey, Jr. Clerk

AD#13708710
MWDN 7/18/18

40 CHERRY STREET
LEGAL NOTICE
NOTICE OF PUBLIC HEARING
NOTICE OF PUBLIC DISCUSSION
TOWN OF ASHLAND

David R. Bufenas and Isabel M. Perez, applicants, have applied for Special Permit under Chapter 282 Sections 8.5, 8.5.8, 9.3, and for a Site Plan Review under Chapter 282 Section 9.4, and any other applicable section of the zoning bylaws, to refurbish the existing building and operate a brewery, tap room, and cafe with outdoor seating. The applicants is also requesting a waiver of the required off-street parking regulations, loading and landscaping requirements under Section 5.0 of Chapter 282. The property, Map 14 Lot 89, is located at 40 Cherry Street in the ADD C Zoning District. A public hearing and public discussion will be held on July 26th, 2018 at 7:30 PM in the Board of Selectmen's Room located at Ashland Town Hall, 101 Main Street, Ashland, MA.

Parties wishing to be heard on this matter should submit comments to the Planning Board ahead of time and/or appear at the time and place indicated above.

Materials may be viewed at Town Hall during normal business hours or at www.ashlandmass.com/543/projects.

For more information or to submit comments contact Sheila Page at 508.532.7927 or spage@ashlandmass.com.

Preston Crow, Chairman
Ashland Planning Board

AD# 13706356
MWDN 7/11, 7/18/18

RFP - ENERGY CONSULTANT-BROKER MANAGEMENT SERVICES
LEGAL NOTICE
CITY OF MARLBOROUGH

REQUEST FOR PROPOSALS
ENERGY CONSULTANT-BROKER MANAGEMENT SERVICES FOR CITY'S MUNICIPAL AGGREGATION PROGRAM

The City of Marlborough, as the awarding authority, is seeking proposals from energy consultants-brokers to provide energy consultant and management services or other energy related services as required for the City's Municipal Aggregation Program as defined by [illegible] and in compliance with all applicable provisions of §134 of Chapter 164 of the General Laws, as amended, and any other statute or regulation related to this process, including 220 CMR 11.00 and the policies and procedures of both the DPU and the DOER. The contract term for services will be up to five (5) including options to renew in the City's sole discretion. The Request for Proposals (RFP) package is available at the Procurement Office, City Hall, 3rd Floor, 140 Main Street, Marlborough, MA 01752, Phone: 508-460-3707 as of July 18, 2018 and separately sealed non-price (technical) and price proposals will be accepted at the Procurement Office until August 8, 2018 at 2:00 P.M., when a register of proposals will be made. RFP packages will be emailed by request to bsleeper@marlborough-ma.gov. The City reserves the right to cancel this RFP, or reject in whole or in part any and all proposals, if the City determines that cancellation or rejection serves the best interests of the City. In accordance with the provisions of applicable statutes, laws, rules, regulations, and ordinances, the City of Marlborough does not discriminate in employment or the provision of services and all qualified contractors will receive consideration without regard to race, age, color, religious creed, gender, handicap, sexual orientation, veteran's status or national origin. The City reserves the right to cancel this procurement process, or reject in whole or in part any and all bids, if the City determines that cancellation or rejection serves the best interests of the public to do so. This legal notice shall also be posted by the MetroWest Daily on the Massachusetts Newspaper Publishers Association's (MNPA) website (masspublicnotices.org).

Beverly J. Sleeper
Chief Procurement Officer

AD#13708803
MWDN 7/18/18

43 MCGEE AVENUE
LEGAL NOTICE
MORTGAGEE'S NOTICE OF SALE OF REAL ESTATE

By virtue and in execution of the Power of Sale contained in a certain Mortgage given by Jose Salvano to Mortgage Electronic Registration Systems, Inc., as nominee for Lime Financial Services, LTD., its successors and assigns, dated November 14, 2006 and registered with the Middlesex County (Southern District) Registry District of the Land Court as Document Number 1427381 noted on Certificate of Title Number 238189, subsequently assigned to U.S. Bank National Association, as Trustee, on behalf of the holders of the Credit Suisse First Boston Mortgage Securities Corp., Home Equity Pass Through Certificates, Series 2007-1 by Mortgage Electronic Registration Systems Inc., ("MERS") as nominee for Lime Financial Services, LTD, its successors and assigns by assignment registered with Middlesex County (Southern District) Registry District of the Land Court as Document Number 1741625 noted on Certificate of Title Number 238189 for breach of the conditions of said Mortgage and for the purpose of foreclosing same will be sold at Public Auction at 11:00 AM on August 1, 2018 at 43 McGee Avenue, Marlborough, MA, all and singular the premises described in said Mortgage, to wit:

That certain parcel of land situated in Marlborough in the County of Middlesex and said Commonwealth, bounded and described as follows: SOUTHEASTERLY by McGee Avenue, one hundred feet; SOUTHWESTERLY by lot 85 as shown on plan hereinafter mentioned, one hundred and fifteen feet; NORTHWESTERLY: by lots 92 and 91 on said plan, one hundred feet; and NORTHEASTERLY: by lot 87 on said plan, one hundred and fifteen feet. Said parcel is shown as lot 86, Sheet 6, on said plan, (Plan No. 3670Q). All of said boundaries are determined by the Court to be located as shown on a plan, as modified and approved by the Court, filed in the Land Registration Office, a copy of a portion of which is filed in the Registry of Deeds for the South Registry District of Middlesex County in Registration Book 577, Page 135, with Certificate 105425. The above described land is subject to an easement as set forth in a grant made by Robert B. Ames et al to the inhabitants of the Town of Marlborough, dated August 18, 1863, duly recorded in Book 1684, Page 511. The above described land is subject to reservations and flowage rights as set forth in two deeds, one given by Stephen L. Ames et al to Martha L. Ames, dated March 16, 1881, duly recorded in Book 1596, Page 402, and the other given by Ross C. Munroe to John C. Cahill, dated May 29, 1909, duly recorded in Book 3431, Page 452, so far as in force and applicable at date of original decree (October 20, 1962). There is appurtenant to the above described land the right in common with others entitled thereto to pass and repass over all the streets and ways shown on said plan, for all purposes for which such ways are commonly used in the City of Marlborough, set forth in Document 396982. The above described land is subject to a Grant of Easement from Paul Livoli, Inc. to Massachusetts Electric Company and New England Telephone and Telegraph Company, Document No. 386810. And it is further certified that said land is under the operation and provisions of Chapter 185 of the General Laws, and any amendments thereto, and that the title of said Benjamin Martinez and Alice M. Martinez to said land is registered under [illegible]

[illegible]

The premises are to be sold subject to and with the benefit of all easements, restrictions, encroachments, building and zoning laws, liens, unpaid taxes, tax titles, water bills, municipal liens and assessments, rights of tenants and parties in possession, and attorney's fees and costs.

TERMS OF SALE:
A deposit of FIVE THOUSAND DOLLARS AND 00 CENTS ($5,000.00) in the form of a certified check, bank treasurer's check or money order will be required to be delivered at or before the time the bid is offered. The successful bidder will be required to execute a Foreclosure Sale Agreement immediately after the close of the bidding. The balance of the purchase price shall be paid within thirty (30) days from the sale date in the form of a certified check, bank treasurer's check or other check satisfactory to Mortgagee's attorney. The Mortgagee reserves the right to bid at the sale, to reject any and all bids, to continue the sale and to amend the terms of the sale by written or oral announcement made before or during the foreclosure sale. If the sale is set aside for any reason, the Purchaser at the sale shall be entitled only to a return of the deposit paid. The purchaser shall have no further recourse against the Mortgagor, the Mortgagee or the Mortgagee's attorney. The description of the premises contained in said mortgage shall control in the event of an error in this publication. TIME WILL BE OF THE ESSENCE.

Other terms, if any, to be announced at the sale.

U.S. Bank National Association, as trustee, on behalf of the holders of the Credit Suisse First Boston Mortgage Securities Corp., Home Equity Pass Through Certificates, Series 2007-1

Present Holder of said Mortgage,
By Its Attorneys,
ORLANS PC
PO Box 540540
Waltham, MA 02454
Phone: (781) 790-7800
18-002351

AD#13706692
MWDN 7/11, 7/18, 7/25/18

1 CATHERINE ROAD
LEGAL NOTICE
MORTGAGEE'S SALE OF REAL ESTATE
1 Catherine Road, Framingham

By virtue and in execution of the power of sale contained in a certain Mortgage given by Michael R. Hugo and Beverly K. Hugo, to Century Bank and Trust Company, said Mortgage dated April 3, 2002 and recorded with the Middlesex County (Southern District) Registry of Deeds, at Book 35241, Page 139, of which Mortgage the undersigned is the present holder, for breach of conditions of said Mortgage and for the purpose of foreclosing the same, the same will be sold at Public Auction at 12:00 p.m. on the 14th day of August, 2018 on the mortgaged premises, hereinafter described, all and singular the premises as described in said Mortgage to wit:

The Land with the buildings thereon situated on the southerly side of Catherine Road in Framingham, Middlesex County, Massachusetts, shown as Lot #4 on the plan entitled "Plan of (Description and encumbrances, if any) Land in Framingham, Massachusetts" dated June 5, 1957 by Ewald & Mesera, Inc., which plan is recorded with Middlesex South District Registry of Deeds as Plan No. 722 of 1957 in Book 11344, Page 606, bounded and described as follows:

NORTHEASTERLY by Catherine Road, shown as Eaton Road on said plan, one hundred fifty-five and 30/100 (155.30) feet;

EASTERLY By Lot #8 on said plan, one hundred seventy three and 17/100 (173.17)

SOUTHERLY By Lot #2 on said plan, ninety two and no/100 (92) feet; And

WESTERLY By Lot #3 on said plan, two hundred thirteen and 86/100 (213.86) feet.

According to said plan said Lot #4 contains 20,475+/- square feet of land.

There is also conveyed the right to use for all purposes of a public way, the strip of land lying between the northerly line of Lot #4 and the broken line identified as "Easement line for future widening purposes all as shown on said plan".

There is also conveyed herewith an easement for driveway and utility purposes for access to Lot #4 under over that portion of Lot #8 that lies easterly and contiguous to Lot #4.

Said easement area consists of approximately twenty (20) foot wide parcel of land between Lot #4 and Lot #5, as shown on the above-mentioned plan, and is to be used in common with others having a right to use said easement area.

The premises are conveyed subject to easements to New England Telephone and Telegraph Company as set forth in an instrument recorded with said [illegible]

[illegible]

TERMS OF SALE: FIFTEEN THOUSAND ($15,000.00) DOLLARS will be required to be paid in cash, certified check or cashier's check of any bank or trust company doing business in the Commonwealth of Massachusetts, by the purchaser, at the time and place of sale as a deposit. A Memorandum of Sale ("Memorandum") shall be executed upon acceptance of the bid and all terms thereunder shall be binding upon the bidder, including the condition that should the high bidder for whatever reason fail to perform under the aforesaid Memorandum, in such event, the bidder shall forfeit the deposit in full which shall become the property of the Mortgagee. The Mortgagee reserves the right without further publication, advertisement or notification to offer the property to the second highest bidder (or other successive bidders, in order of their bid) under the same conditions set forth herein. The Mortgagee further reserves the right without further publication, advertisement or notification, to purchase the within described property at the amount bid by the second highest bidder. The terms of the Memorandum of Sale shall be announced prior to the bid. The balance of the bid price is to be paid in cash, certified check or cashier's check drawn upon any bank or trust company doing business in the Commonwealth of Massachusetts within thirty (30) days after the date of sale to be deposited in escrow with Riccardo L. Rullo, Esquire, attorney for Century Bank and Trust Company. Deed (which shall be in the form of the usual Mortgagee's Deed under the Statutory Power of Sale) to be delivered within three (3) days thereafter at which time it shall be the sole and exclusive responsibility of the successful bidder to cause the same to be recorded with the Middlesex County (Southern District) Registry of Deeds in accordance with law.

Other terms, if any, to be announced at the sale.

CENTURY BANK AND TRUST COMPANY
By its attorney,

RICCARDO L. RULLO
LAW OFFICES OF FRANK N DARDENO
424 BROADWAY
SOMERVILLE, MA 02145
617-666-2600

Dated: 7/14/18

AD#13706947
MWDN 7/18, 7/25, 8/1/18

Attachment B

EVIO LABS

NOTICE FOR COMMUNITY OUTREACH MEETING

Notice is hereby given that a Community Outreach Meeting for a proposed Marijuana Establishment is scheduled for 7/30/18 at 6:00-8:00 at Framingham City Hall, 150 Concord St # 129, Framingham, MA 01702, Blumer Room. The proposed Cannabis Testing Facility is anticipated to be located at 40 Speen St, Framingham. There will be an opportunity for the public to ask questions.

Attachment C

EVIO LABS

NOTICE FOR COMMUNITY OUTREACH MEETING

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Attachment C

Hello Framingham!

MEET EVIO

We're EVIO Labs and your new neighbor. EVIO Labs is a biotechnology and services company with headquarters in Bend, Oregon. As the leading North American provider of fully accredited analytical testing, scientific research and advisory services to the regulated cannabis industry, we know we have a responsibility to our neighbors. Our mission is to ensure the safety and quality of the nation's cannabis supply. Yet we realize to you we must first be a considerate and law-abiding member of the neighborhood.

Our concerns are the same as yours. EVIO Labs does not buy, sell, or grow cannabis products but we do play an important role in this industry that is becoming so important to the community. Our facility utilizes state of the art security and odor control systems appropriate for the nature of our biotechnology research and testing services operation.

SERVICES

EVIO Labs provides the following services at our Framingham location:

- Cannabinoid analysis
- Terpene profile
- Pesticide screening
- Residual Solvent screening
- Heavy Metals analysis
- Mycotoxin screening
- Microbiological testing
- Plant inspections

While we happily introduce ourselves to the local community we realize that is not enough. We back our words with action. The back of this introduction includes our community outreach guidelines and practices. We encourage you to review these and contact us with questions you might have.

EVIOLABS.COM

EVIO Labs Massachusetts
40 Speen Street, Suite 301
Framingham, MA 01701
Phone: (506) 485-0578
Email: EVIOLabsMA@eviolabs.com

(OTCQB:EVIO)

Attachment C

EVIO LABS

In accordance with 935 CMR 500.000, EVIO Labs Massachusetts, complies with General Manufacturing zoning requirements. The following questions are requirements of the Cannabis Control Commission of the Commonwealth of Massachusetts' Community Outreach guidelines.

Q: What type(s) of Marijuana Establishment will be sited at the location?
A: Cannabis analytical and quality assurance testing services.

Q: Is the proposed Marijuana Establishment allowed under current zoning bylaws/ordinances or is a zoning amendment required to allow it to go there?
A: Yes. EVIO Labs is in full compliance with current zoning requirements.

Q: Is the proposed Marijuana Establishment allowed by right or does it require local zoning permitting?
A: EVIO Labs is permitted by right to operate at the stated location.

Q: What permits are required?
A: None.

Q: Is there a local licensing regulation pertaining to Marijuana Establishments?
A: At this time there is not.

Q: Is there a local Board of Health regulation pertaining to Marijuana Establishments?
A: At this time there is not.

Q: Does the proposed location comply with the 500-foot buffer zone from existing public or private school buildings (K-12)?
A: Yes.

Q: Do local bylaws or ordinance create a smaller buffer zone?
A: Yes.

Q: If the applicant is moving into an existing building or building a new one, will its premises comply with the security requirements set forth in 935 CMR 500?
A: EVIO Labs will occupy an existing building. Our plans include updating all security systems to specifications in accordance with state regulations for cannabis facilities.

Q: What steps will be taken by the Marijuana Establishment to prevent diversion to minors?
A: Persons under the age of 18 will not be allowed to enter the lab premises.

Q: Information demonstrating how the applicant intends to ensure that the location will not constitute a nuisance to the community as defined by law.
A: EVIO Labs does not conduct business with the general public nor does it provide retail services. As such there will be no significant additional traffic to the area.

EVIOLABS.COM

EVIO Labs Massachusetts
40 Speen Street, Suite 301
Framingham, MA 01701
Phone: (508) 485-0578
Email: EVIOLabsMA@eviolabs.com

(OTCQB:EVIO)

As of August, 2020, the total amount of financial benefits accruing to the host community pursuant to the host community agreement is $0.

The laboratory has not begun operating thus far generated $0 revenue.

EVIO Labs Massachusetts 40 Speen St. Framingham, MA 617-721-3222

EVIO Labs MA - Community Impact Plan

For decades, the cannabis prohibition, and the war on drugs in general, has had an inappropriate and disproportionate adverse impact on certain communities throughout the Commonwealth. As a cannabis testing lab, we expect to enjoy economic benefit from the legalization of a product that was previously deemed criminal to possess. The EVIO team understands how essential it is to create an equitable space where those who have been harmed by the war on drugs have first access to the benefits this industry will provide to our state. Below is our proposal to do our part to positively impact areas that have been disproportionately harmed by the war on drugs. COO of EVIO, Inc., Lori Glauser was born in Lowell, and spent much of her youth in the area. This led us to specifically target Lowell as a community of impact that we will support in this endeavor.

Our Mission

As a cannabis testing lab, our staff is comprised largely of scientists, and as such we are passionate supporters of STEM education. EVIO will contribute time and resources to help young people who live in communities that have been affected by living in affected areas. We will anonymously support k-12 schools to support the students who show strong promise in the science and math programs through funding, events, and development. Additionally, we will seek to partner with Economic Empowerment Applicants, minority owned businesses, and other organizations that work to support the areas disproportionately harmed by the drug war. We will also support community activities that will make the impacted communities a more beautiful place to live.

Positive Impact Plan Programs

EVIO has identified five specific areas of focus:

- Target hiring staff from affected communities.
- Offer discounted testing services and special promotions to Economic Empowerment licensees.
- Support not-for-profit organizations that create a positive impact on communities that have disproportionately impacted.
- Support science programs in affected area schools to prepare young scientists.
- Engage EVIO staff to participate in volunteer activities that will positively impact cannabis entrepreneurs from disproportionately harmed communities

<u>Preferential Staffing</u>

EVIO Labs MA intends to hire up to 12 new employees in the next two years. We will recruit from, and endeavor to hire staff from impacted communities. We will do this by recruiting staff from UMass Lowell, from Middlesex Community College, and other area schools and universities, and target our employment searches to impacted areas. EVIO will also provide internship programs for students and recent graduates.

<u>Discounted Testing Services</u>

EVIO Labs MA will provide discounted testing services (up to 25% off retail) for Economic Empowerment Licensees.

School Science Programs

EVIO will donate to the annual Lowell School District Science Fari. ($2,000+ annually plus volunteer hours)The Lowell School District's STEM Club prepares all participating students for a Lowell District Science Fair in May. We intend to support this science fair by offering financial support to cover food and transportation for students, as well as adult volunteers and offering to mentor students after school. After EVIO is fully staffed we intend to volunteer at the STEM club for the 2020 Science Fair, and we expect to increase our support as our company grows. We are cognizant of the potential effects that cannabis may have on minors, and EVIO does not support consumption by minors except for specific medicinal use. EVIO will not promote cannabis consumption in any way to the students, and will not incorporate any cannabis branding or messaging in our student-oriented activities.

Partner with Organizations that Support Communities ($3,000+ annually).

We will support **ELEVATE NE**. ELEVATE is an organization whose mission is to empower underrepresented populations to work and lead in the cannabis industry, and to empower our communities to be educated customers and responsible consumers. ELEVATE Sponsors events that that focused on developing the cannabis workforce. Past events included education and discussion about sexual harassment in the cannabis workplace, cultivation workshops, and sponsor cannabis science event in areas of disproportionate impact with free entry to local residents. ELEVATE NE will begin offering classes for those who intend to join the cannabis industry, these events will raise funds that will support free training and assistance events in disproportionately impacted neighborhoods.

EVIO will support this effort by becoming a Tier 2 Business Sponsor and providing scholarships for deserving individuals (as determined by ELEVATE) to the educational series as well as sponsoring the free community education events.

EVIO will also join the **Massachusetts Recreational Consumer Council (MRCC)** and become a Clean Safe Industry Patron. MRCC provides community organizing and outreach, municipal guidance alerts, and offers assistance to companies that promote equity among women, minorities, veterans, people with disabilities, and people of all gender identities and sexual orientation.

EVIO will support the **Cannabis Community Care Research Network (C3RN)** in its efforts to support development of Equity licensees, and development of programs that support impacted communities.

Specifically, EVIO will contribute to a scholarship fund for C3RN attendees with other organizations that will create a funding pool for Equity Applicants or minorities who wish to attend C3RN events (Scholarship recipients are determined by C3RN). EVIO will also support C3RN's internship program efforts an internship program that will focus on partnering with institutions of higher education, community colleges, vocational/technical schools in areas identified as disproportionally impacted by the drug war to source interns (including undergrad, graduate, and doctoral students) and provide skills-based practical training in areas of cannabis research, data analytics, chemistry, extraction, and other relevant topics to work on R&D projects in the lab.

EVIO Labs Massachusetts 40 Speen St. Framingham, MA 617-721-3222

Business Mentorship and Support

EVIO will provide staff paid time off to volunteer in Lowell or other affected communities to assist cannabis entrepreneurs and patients. Volunteer activities may range from business mentoring, classes on cannabis science and technology, compliance consulting, or support getting businesses open and operating.

Measurement and Accountability

- Use .5% of net revenue to support local events and community groups that align with this mission.
- Offer up to 25% discounts for EEA owned businesses for their first 2 years of operation and minimum of 15% after that.
- Become a partner or member of at least two organizations that work to directly support the needs of the disproportionately harmed community members.
- Commit to 64 hours of volunteer business and technology mentorship to EEA owned businesses during the first year, and up to 160 hours per year of volunteer mentorship in years following.
- Use .5% of net revenue to support students who excel in science in the STEM program.

Sincerely,

Lori Glauser
Chief Operating Officer
EVIO Labs, Inc.

The Commonwealth of Massachusetts
Town of Southbourgh

BUSINESS CERTIFICATE

Fee: $40.00 (for four years)
Issue date: 8/22/2017
Expires: 8/21/2021

In conformity with the provisions of Ch.110, §5 of the General Laws, as amended, the undersigned hereby declare(s) that a business under the title of:

Name of Business: Evio Labs MA **Corporate Name:** Viridis Analytics MA, LLC

Nature of Business: Analytical Laboratory Testing **is conducted at**

Location of Business in Southbourgh: 200 Turnpike Rd, 2nd Fl, 01772 **, accepting mail at**

Mailing Address (if different): _____ **, or via email /phone at**

Email Address: william@eviolabs.com **Phone #:** (541) 633-4568 x.1100

by the following named person (s):

Owner (s) Full Name (s) *	Owner Residence Address (es)
1. William Waldrop, Member	1. 10433 Morning Sorrow St. Las Vegas, NV 89183
2.	2.
3.	3.
4.	4.

A True Copy
Attest:
James F Hyatt
Town Clerk, Southborough

** If a corporate officer, include the title of signing officer.*

Notary required ONLY when not signed in front of the Town Clerk

Owner Signatures below -- Sign ONLY in the PRESENCE of a Notary Public OR the TOWN CLERK

Signed under penalties of perjury:

1. William M Waldrop
2. _____
3. _____
4. _____

STATE OF NEVADA ~~The Commonwealth of Massachusetts~~
COUNTY OF CLARK ~~Worcester County, ss.~~ Date: 8/16/17

Personally appeared before me the above-named William Waldrop proved through satisfactory evidence of identification, which was a NV DLicense to be the person(s) whose name is signed on the above document who swore or affirmed to me the contents of the document are truthful and accurate to the best of their knowledge and belief.

CLAUDIA J CROUSE
Notary Public, State of Nevada
Appointment No. 14-15249-1
My Appt. Expires Oct. 22, 2018

Notary Public: Claudia Crouse

(Town Seal) (Notary Seal)

James F Hyatt
Town Clerk

Notary expires: 10/22/2018

A certificate issued in accordance with this section shall be in force and effect for four years from the date of issue and shall be renewed each four years thereafter so long as such business shall be conducted and shall lapse and be void unless so renewed.

A statement must be filed with the Town Clerk upon discontinuing, retiring or withdrawing from such business.

Delaware

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF FORMATION OF "VIRIDIS ANALYTICS MA, LLC", FILED IN THIS OFFICE ON THE TWENTY-SECOND DAY OF JULY, A.D. 2016, AT 5:20 O`CLOCK P.M.

Jeffrey W. Bullock, Secretary of State

6104728 8100
SR# 20165039995

Authentication: 202713733
Date: 07-25-16

You may verify this certificate online at corp.delaware.gov/authver.shtml

State of Delaware
Secretary of State
Division of Corporations
Delivered 05:20 PM 07/22/2016
FILED 05:20 PM 07/22/2016
SR 20165039995 - File Number 6104728

STATE OF DELAWARE
LIMITED LIABILITY COMPANY

CERTIFICATE OF FORMATION

of

VIRIDIS ANALYTICS MA, LLC

FIRST. The name of the limited liability company is Viridis Analytics MA, LLC.

SECOND. The address of its registered office in the State of Delaware is 2711 Centerville Road, Suite 400, City of Wilmington 19808, County of New Castle; and the name of the registered agent of the Company in the State of Delaware at such address is Corporation Service Company.

IN WITNESS WHEREOF, the undersigned has executed this Certificate of Formation of Viridis Analytics MA, LLC this 19 day of July, 2016.

Benjamin Tabar, Authorized Person

CSC
251 Little Falls Drive
Wilmington, DE 19808-1674
800.927.9800
302.636.5454 fax
www.cscglobal.com

VIRIDIS ANALYTICS MA, LLC
Matter Number n/a

D E L A W A R E S T A T U S S E A R C H

Entity Information

		Search Results Date/Time	**01-23-2018 11:55**
Entity Name	**VIRIDIS ANALYTICS MA, LLC**		
File Number	**6104728**	**Status**	**Good Standing since 20160722**
Entity Type	Limited Liability Company	**Corp Type**	General
Tax Type	Annual L.L.C. Tax	**Stock Corporation**	No
Residency	Domestic	**State**	DE
Incorporation Date	20160722		
Renew Date		**Expire Date**	
Bankruptcy		**Bankrupt Date**	
Case No			
Orig Incorp Country		**Orig Date**	
Merged To Number			
Qtrly Filings	False	**Last Ann Rpt**	0
Foreign incorporation date			
Original foreign name			
Original foreign kind	Unknown		

Registered Agent

Agent Name	CORPORATION SERVICE COMPANY			**Agent ID**	9000014
Address	251 LITTLE FALLS DRIVE				
	,WILMINGTON,New Castle				
State	DE	**Country**	US	**Zip**	19808

Stock Information

Amendment Number	0	**Effective Date**		**End Date**	
Description	**Class**	**Series**	**Authorized**	**Par Value**	**Designated shares**
		Total Shares Authorized			0
		No Par Shares			0

CSC
251 Little Falls Drive
Wilmington, DE 19808-1674
800.927.9800
302.636.5454 fax
www.cscglobal.com

VIRIDIS ANALYTICS MA, LLC
Matter Number n/a

D E L A W A R E S T A T U S S E A R C H

Filing History (last 5 filings)

Filing Year	Document Code	Pages	Filing Date/Time	Effective Date	Filing Status	Merger Type
2016	LLC	1	20160722T17:20:00:0000	20160722	Archived	

Taxes Due

Tax Year	Filing Fee	Total Tax	Penalty	Interest	Other	Paid	Balance
2018	0.00	300.00	0.00	0.00	0.00	0.00	300.00
2017	0.00	300.00	0.00	0.00	0.00	0.00	300.00
2016	0.00	300.00	0.00	0.00	0.00	300.00	0.00
						Tax Balance	600.00

Delaware

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF INCORPORATION OF "VIRIDIS ANALYTICS INC.", FILED IN THIS OFFICE ON THE TWENTY-SECOND DAY OF JULY, A.D. 2016, AT 5:04 O`CLOCK P.M.

A FILED COPY OF THIS CERTIFICATE HAS BEEN FORWARDED TO THE NEW CASTLE COUNTY RECORDER OF DEEDS.

6104713 8100
SR# 20165039656

Authentication: 202714109
Date: 07-25-16

You may verify this certificate online at corp.delaware.gov/authver.shtml

State of Delaware
Secretary of State
Division of Corporations
Delivered 05:04 PM 07/22/2016
FILED 05:04 PM 07/22/2016
SR 20165039656 - File Number 6104713

CERTIFICATE OF INCORPORATION

OF

VIRIDIS ANALYTICS INC.

* * * * * *

FIRST. The name of the corporation is Viridis Analytics Inc. (the "Corporation").

SECOND. The address of the registered office of the Corporation in the State of Delaware is 2711 Centerville Road, Suite 400, City of Wilmington 19808, County of New Castle; and the name of the registered agent of the Corporation in the State of Delaware at such address is Corporation Service Company.

THIRD. The nature of the business or purposes to be conducted or promoted is to engage in any lawful act or activity for which corporations may be organized under the General Corporation Law of the State of Delaware.

FOURTH. The total number of shares of stock which the Corporation shall have authority to issue is one thousand (1,000) shares of Common Stock with a par value of $0.001 per share.

FIFTH. The name and mailing address of the sole incorporator is as follows:

Name	Mailing Address
Joseph F. Lusardi	1188 Willis Avenue, #224 Albertson, New York 11507

SIXTH. The Corporation is to have perpetual existence.

SEVENTH. In furtherance and not in limitation of the powers conferred by the laws of the State of Delaware:

A. Subject to any additional vote required by this certificate of incorporation or the bylaws, the board of directors of the Corporation is expressly authorized to adopt, amend or repeal the bylaws of the Corporation.

B. Subject to any additional vote required by this certificate of incorporation, the number of directors of the Corporation shall be determined in the manner set forth in the bylaws of the Corporation.

C. Elections of directors need not be by written ballot unless the bylaws of the Corporation shall so provide.

D. The books of the Corporation may be kept at such place within or without the State of Delaware as the bylaws of the Corporation may provide or as may be designated from time to time by the board of directors of the Corporation.

E. Meetings of stockholders may be held within or without the State of Delaware, as the bylaws of the Corporation may provide.

EIGHTH. Whenever a compromise or arrangement is proposed between the Corporation and its creditors or any class of them and/or between the Corporation and its stockholders or any class of them, any court of equitable jurisdiction within the State of Delaware may, on the application in a summary way of the Corporation or of any creditor or stockholder thereof or on the application of any receiver or receivers appointed for the Corporation under the provisions of Section 291 of Title 8 of the Delaware Code or on the application of trustees in dissolution or of any receiver or receivers appointed for the Corporation under the provisions of Section 279 of Title 8 of the Delaware Code, order a meeting of the creditors or class of creditors, and/or of the stockholders or class of stockholders of the Corporation, as the case may be, to be summoned in such manner as the said court directs. If a majority in number representing three-fourths in value of the creditors or class of creditors, and/or of the stockholders or class of stockholders of the Corporation, as the case may be, agree to any compromise or arrangement and to any reorganization of the Corporation as consequence of such compromise or arrangement, the said compromise or arrangement and the said reorganization shall, if sanctioned by the court to which the said application has been made, be binding on all the creditors or class of creditors, and/or on all the stockholders or class of stockholders, of the Corporation, as the case may be, and also on the Corporation.

NINTH. To the fullest extent permitted by law, a director of the Corporation shall not be personally liable to the Corporation or its stockholders for monetary damages for breach of fiduciary duty as a director. If the General Corporation Law or any other law of the State of Delaware is amended after approval by the stockholders of this Article Ninth to authorize corporate action further eliminating or limiting the personal liability of directors, then the liability of a director of the Corporation shall be eliminated or limited to the fullest extent permitted by the General Corporation Law as so amended.

Any repeal or modification of the foregoing provisions of this Article Ninth by the stockholders of the Corporation shall not adversely affect any right or protection of a director of the Corporation existing at the time of, or increase the liability of any director of the Corporation with respect to any acts or omissions of such director occurring prior to, such repeal or modification.

TENTH: The following indemnification provisions shall apply to the persons enumerated below.

1. Right to Indemnification of Directors and Officers. The Corporation shall indemnify and hold harmless, to the fullest extent permitted by applicable law as it presently exists or may hereafter be amended, any person (an "Indemnified Person") who was or is made or is threatened to be made a party or is otherwise involved in any action, suit or proceeding, whether civil, criminal,

administrative or investigative (a "Proceeding"), by reason of the fact that such person, or a person for whom such person is the legal representative, is or was a director or officer of the Corporation or, while a director or officer of the Corporation, is or was serving at the request of the Corporation as a director, officer, employee or agent of another corporation or of a partnership, joint venture, limited liability company, trust, enterprise or nonprofit entity, including service with respect to employee benefit plans, against all liability and loss suffered and expenses (including attorneys' fees) reasonably incurred by such Indemnified Person in such Proceeding. Notwithstanding the preceding sentence, except as otherwise provided in Section 3 of this Article Tenth, the Corporation shall be required to indemnify an Indemnified Person in connection with a Proceeding (or part thereof) commenced by such Indemnified Person only if the commencement of such Proceeding (or part thereof) by the Indemnified Person was authorized in advance by the board of directors.

2. Prepayment of Expenses of Directors and Officers. The Corporation shall pay the expenses (including attorneys' fees) incurred by an Indemnified Person in defending any Proceeding in advance of its final disposition, provided, however, that, to the extent required by law, such payment of expenses in advance of the final disposition of the Proceeding shall be made only upon receipt of an undertaking by the Indemnified Person to repay all amounts advanced if it should be ultimately determined that the Indemnified Person is not entitled to be indemnified under this Article Tenth or otherwise.

3. Claims by Directors and Officers. If a claim for indemnification or advancement of expenses under this Article Tenth is not paid in full within 30 days after a written claim therefor by the Indemnified Person has been received by the Corporation, the Indemnified Person may file suit to recover the unpaid amount of such claim and, if successful in whole or in part, shall be entitled to be paid the expense of prosecuting such claim. In any such action the Corporation shall have the burden of proving that the Indemnified Person is not entitled to the requested indemnification or advancement of expenses under applicable law.

4. Indemnification of Employees and Agents. The Corporation may indemnify and advance expenses to any person who was or is made or is threatened to be made or is otherwise involved in any Proceeding by reason of the fact that such person, or a person for whom such person is the legal representative, is or was an employee or agent of the Corporation or, while an employee or agent of the Corporation, is or was serving at the request of the Corporation as a director, officer, employee or agent of another corporation or of a partnership, joint venture, limited liability company, trust, enterprise or nonprofit entity, including service with respect to employee benefit plans, against all liability and loss suffered and expenses (including attorney's fees) reasonably incurred by such person in connection with such Proceeding. The ultimate determination of entitlement to indemnification of persons who are non-director or officer employees or agents shall be made in such manner as is determined by the board of directors in its sole discretion. Notwithstanding the foregoing sentence, the Corporation shall not be required to indemnify a person in connection with a Proceeding initiated by such person if the Proceeding was not authorized in advance by the board of directors.

5. Advancement of Expenses of Employees and Agents. The Corporation may pay the expenses (including attorney's fees) incurred by an employee or agent in defending any Proceeding in advance of its final disposition on such terms and conditions as may be determined by the board of directors.

6. Non-Exclusivity of Rights. The rights conferred on any person by this Article Tenth shall not be exclusive of any other rights which such person may have or hereafter acquire under any statute, other provision of this certificate of incorporation, bylaws, agreement, vote of stockholders or disinterested directors or otherwise.

7. Other Indemnification. The Corporation's obligation, if any, to indemnify any person who was or is serving at its request as a director, officer or employee of another Corporation, partnership, limited liability company, joint venture, trust, organization or other enterprise shall be reduced by any amount such person may collect as indemnification from such other Corporation, partnership, limited liability company, joint venture, trust, organization or other enterprise.

8. Insurance. The board of directors may, to the full extent permitted by applicable law as it presently exists, or may hereafter be amended from time to time, authorize an appropriate officer or officers to purchase and maintain at the Corporation's expense insurance: (a) to indemnify the Corporation for any obligation which it incurs as a result of the indemnification of directors, officers and employees under the provisions of this Article Tenth; and (b) to indemnify or insure directors, officers and employees against liability in instances in which they may not otherwise be indemnified by the Corporation under the provisions of this Article Tenth.

9. Amendment or Repeal. Any repeal or modification of the foregoing provisions of this Article Tenth shall not adversely affect any right or protection hereunder of any person in respect of any act or omission occurring prior to the time of such repeal or modification. The rights provided hereunder shall inure to the benefit of any Indemnified Person and such person's heirs, executors and administrators.

I, THE UNDERSIGNED, being the sole incorporator hereinabove named, for the purpose of forming a corporation pursuant to the General Corporation law of the State of Delaware, do make this certificate, hereby declaring and certifying that this is my act and deed and the facts herein stated are true, and accordingly have hereunto set my hand this22nd day of July, 2016.

Joseph F. Lusardi
Sole Incorporator

Commonwealth of Massachusetts
Department of Revenue
Christopher C. Harding, Commissioner

mass.gov/dor

Letter ID: L0673743488
Notice Date: August 1, 2018
Case ID: 0-000-578-313

CERTIFICATE OF GOOD STANDING AND/OR TAX COMPLIANCE

VIRIDIS ANALYTICS LLC
200 TURNPIKE RD
SOUTHBOROUGH MA 01772-2125

Why did I receive this notice?

The Commissioner of Revenue certifies that, as of the date of this certificate, VIRIDIS ANALYTICS LLC is in compliance with its tax obligations under Chapter 62C of the Massachusetts General Laws.

This certificate doesn't certify that the taxpayer is compliant in taxes such as unemployment insurance administered by agencies other than the Department of Revenue, or taxes under any other provisions of law.

This is not a waiver of lien issued under Chapter 62C, section 52 of the Massachusetts General Laws.

What if I have questions?

If you have questions, call us at (617) 887-6367 or toll-free in Massachusetts at (800) 392-6089, Monday through Friday, 8:30 a.m. to 4:30 p.m..

Visit us online!

Visit mass.gov/dor to learn more about Massachusetts tax laws and DOR policies and procedures, including your Taxpayer Bill of Rights, and MassTaxConnect for easy access to your account:

- Review or update your account
- Contact us using e-message
- Sign up for e-billing to save paper
- Make payments or set up autopay

Edward W. Coyle, Jr., Chief
Collections Bureau

D

The Commonwealth of Massachusetts

William Francis Galvin
Secretary of the Commonwealth
One Ashburton Place, Room 1717, Boston, Massachusetts 02108-1512

Limited Liability Company
Certificate of Organization
(General Laws Chapter 156C, Section 12)

Federal Identification No.: [redacted]

(1) The exact name of the limited liability company:

Viridis Analytics MA, LLC

(2) The street address of the office in the commonwealth at which its records will be maintained:

40 Speen Street, Ste. 301, Framingham, MA 01701

(3) The general character of the business:

Full service analytical testing laboratory; and to do any and all acts and things as are permitted to be done by a limited liability company organized under the laws of the Commonwealth of Massachusetts

(4) Latest date of dissolution, if specified: _____

(5) The name and street address, of the resident agent in the commonwealth:

NAME	ADDRESS
Registered Agents, Inc.	82 Wendell Ave., Ste. 100 Pittsfield, MA 01201

(6) The name and business address, if different from office location, of each manager, if any:

NAME	ADDRESS
Lori Glauser	3505 Cadillac, Unit F-1 Costa Mesa, CA 92626
William Waldrop	62930 O.B. Riley Road #300 Bend, OR 97703

(7) The name and business address, if different from office location, of each person in addition to manager(s) authorized to execute documents filed with the Corporations Division, and at least one person shall be named if there are no managers:

NAME	ADDRESS

(8) The name and business address, if different from office location, of each person authorized to execute, acknowledge, deliver and record any recordable instrument purporting to affect an interest in real property recorded with a registry of deeds or district office of the land court:

NAME	ADDRESS
William Waldrop	62930 O.B. Riley Road #300 Bend, OR 97703

(9) Additional matters:

Signed by *(by at least one authorized signatory)*: William Waldrop

Consent of resident agent:

I Bill Hunt Of Registered Agents Inc., resident agent of the above limited liability company, consent to my appointment as resident agent pursuant to G.L. c 156C § 12*

**or attach resident agent's consent hereto.*

VIRIDIS ANALYTICS MA, LLC

Secretary of the Commonwealth of Massachusetts
Corporations Division
McCormack Building
One Ashburton Place, 17th Floor
Boston, MA 02108

October 3, 2018

Dear Sir/Madam:

The purpose of this letter is to provide consent for filing a new domestic entity in Massachusetts for Viridis Analytics MA, LLC currently organized as a foreign entity in the state of Delaware.

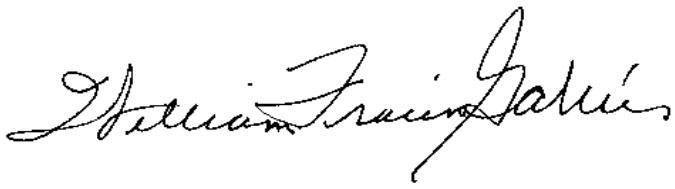
Sincerely,

William Waldrop, Member

THE COMMONWEALTH OF MASSACHUSETTS

I hereby certify that, upon examination of this document, duly submitted to me, it appears that the provisions of the General Laws relative to corporations have been complied with, and I hereby approve said articles; and the filing fee having been paid, said articles are deemed to have been filed with me on:

October 04, 2018 05:38 PM



WILLIAM FRANCIS GALVIN

Secretary of the Commonwealth

VIRIDIS OP ID: D5

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 07/31/2018

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Brown & Brown of Garden City dba Sobel Affiliates 595 Stewart Avenue Garden City, NY 11530-4735 Michael Labadorf	**CONTACT NAME:** Michael Labadorf **PHONE (A/C, No, Ext):** 516-745-0000 **FAX (A/C, No):** **E-MAIL ADDRESS:**
INSURED Viridis Analytics MA LLC c/o EVIO, Inc 62930 O.B. Riley Rd. ste 300 Bend, OR 97703	**INSURER(S) AFFORDING COVERAGE** / **NAIC #** **INSURER A :** Int'l Ins. Co of Hanover Ltd **INSURER B :** **INSURER C :** **INSURER D :** **INSURER E :** **INSURER F :**

COVERAGES **CERTIFICATE NUMBER:** **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	X COMMERCIAL GENERAL LIABILITY						EACH OCCURRENCE	$ 1,000,000
	CLAIMS-MADE X OCCUR			IK21X003375-00	10/09/2017	10/09/2018	DAMAGE TO RENTED PREMISES (Ea occurrence)	$ 100,000
							MED EXP (Any one person)	$ 1,000
							PERSONAL & ADV INJURY	$ 1,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	$ 2,000,000
	X POLICY PRO-JECT LOC						PRODUCTS - COMP/OP AGG	$ excluded
	OTHER:							$
	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident)	$
	ANY AUTO						BODILY INJURY (Per person)	$
	ALL OWNED AUTOS / SCHEDULED AUTOS						BODILY INJURY (Per accident)	$
	HIRED AUTOS / NON-OWNED AUTOS						PROPERTY DAMAGE (Per accident)	$
								$
	UMBRELLA LIAB OCCUR						EACH OCCURRENCE	$
	EXCESS LIAB CLAIMS-MADE						AGGREGATE	$
	DED RETENTION $							$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY Y / N						PER STATUTE OTH-ER	
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? N / A						E.L. EACH ACCIDENT	$
	(Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - EA EMPLOYEE	$
							E.L. DISEASE - POLICY LIMIT	$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

CERTIFICATE HOLDER

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

Michael Labadorf EVP

Business and Operating Plan

A proposed analytical testing lab located at:

EVIO Labs MA, LLC
40 Speen St.
Framingham, MA

Revised July 31. 2018

EVIO Labs MA, LLC
40 Speen St.
Framingham, MA

Dear Commissioner:

In support of the application for the cannabis testing laboratory license application, please accept the following request that certain privileged documents and information contained within the application be withheld from public disclosure which protects certain copyrighted and trade secrets materials.

The purpose of this privilege is to protect secret information that is essential to the continued operation of a business or industry and may be afforded some measures of protection against disclosure.

It is our belief that certain materials contained within the license application including but not limited to; the Standard Operating Procedures and Operating Plans for the operation of this testing facility are protected as privileged information and shall not be disclosed to the public.

Please feel free to contact our office with any additional questions.

Kind Regards,

Lori Glauser, COO
EVIO, Inc.

EVIO Labs MA, LLC
40 Speen St.
Framingham, MA

Dear Commissioners:

On behalf of the EVIO, Inc., it is our pleasure to submit for your consideration this application for a cannabis testing laboratory license. The included document describes our operation, our adherence with 935 CMR, and our plans for operating within the laws of the Commonwealth, current and future.

With eight labs currently operating in California, Oregon, Massachusetts including licensed labs in Florida and Colorado EVIO looks forward to operating in Framingham, where we will provide a much needed supply of testing services to both medical and adult use providers throughout the state.

Kind Regards,

Lori Glauser, COO
EVIO, Inc.

Table of Contents

EVIO Labs Business Plan

EVIO Labs MA, LLC is a subsidiary of EVIO, Inc., a company that has been providing analytical testing and advisory services to the cannabis industry nationwide since 2014. EVIO Labs is a life sciences company dedicated to providing agricultural, medical, and biotechnology industries with high quality analytical and consulting services.

EVIO Labs are all accredited to ISO 17025 standards or better, and are all licensed to operate in their respective states.

EVIO values:

- Producing accurate and precise data supported by quality control measures
- Honest communication with clients and shareholders
- Continuous improvement of products and services
- Upholding scientific integrity
- Promotion of public scientific literacy
- Promotion of natural products and life science research
- Adding value to local businesses and products

Products and Services

Analytical Testing

- Cannabinoid Potency
    - In most labs, we detect 7 cannabinoids including THC, THCA, CBD, CBDA, CBN, CBC and CBG. This also includes THC:CBD ratio for immature plants.
- Terpene Analysis
- Water Activity and Moisture Content
- Microbiological Testing
    - Yeast/Mold Enumeration
    - Bacterial Testing (*E. coli*, Salmonella, Aflatoxin)
- Pesticide/Chemical Screening
- Residual Solvent Screening
- Immature Plant Inspection
- Foreign Matter Inspections
- Heavy Metals Screening

Technical Consulting and R&D Services

- Product and Dose Formulation
- Product Research and Development
- Quality Assurance Development

- Cultivation and Processing Operations Improvement
- Custom Projects

Advisory Services

- Business Planning and Forecasting
- Licensing and Permitting Support
- Business Process Optimization
- Market and Industry Research
- Cannabis Science Education and Training

Our Consumer

EVIO Labs MA will primarily serve the compliance testing needs for licensed RMDs in Massachusetts in accordance with 935 CMR 500 *Cannabis Control Commission Adult Use of Marijuana* and as applicable, 105 CMR 725: *Implementation of an Act for the Humanitarian Medical Use of Marijuana.*

EVIO Labs may also provide informational testing services for industrial hemp clients, medical patients and, as allowed consumers in legal possession of cannabis or hemp who seek information about their cannabis.

EVIO Labs will provide critical information about the quality and content of cannabis flower, concentrates, extracts, and infused edibles ("product"). It provides this information by gathering samples of product from the consumer, typically at their place of business, and bringing those samples to the lab for analysis. Once the analysis is complete, the samples are destroyed, and the test results transmitted to the consumer electronically.

In addition, we will provide consulting and R&D services to individuals and groups seeking cannabis industry expertise including startup and established businesses, universities, and governments.

Project Financials

EVIO Labs has developed a detailed financial model that describes all costs including construction, operation, maintenance, compensation of employees, equipment costs, utility costs, and other operation costs.

EVIO Labs is basing our budgets on opening multiple other locations in multiple states. EVIO Labs has invested a significant budget to procure sufficient equipment including instrumentation required to meet the needs of Massachusetts testing rules. In addition, the lab will invest in industry leading Security and Surveillance measures, such as alarms and CCTV.

EVIO has sufficient capital available to cover *startup costs and more than three months of operating costs, as described below:*

Startup (Three Month) Operating Cost Summary and Use of Funds

EVIO Labs MA will require approximately $450,000 in startup capital. The Source of Funds is EVIO, Inc., parent company of EVIO Labs MA. Use of funds is detailed below:

Business Planning and Consulting	25,500
Building Lease Deposit Plus Three Months Pre-Op Rent	47,400
Building Tenant Improvements (Design and Construction)	30,000
Equipment and Vehicle Lease Deposits	50,000
Furnishings, Lab Benches, Fume Hoods, Safety Equipment	50,000
Security System	20,000
Computers, hardware, networking	16,500
Permits and Fees	50,000
Initial Lab Labor (up to 7)	120,000
Pre-Opening Operating Costs (Utilities, Overhead)	30,000
Contingency	23,690
Total Startup Costs	440,590

Total Startup Capital Required $440, 590

Proof of Capitalization

EVIO, Inc. is a publicly traded company that makes all financial statements publicly available through the Securities and Exchange Commission's EDGAR database. Our most recently filed quarterly report indicates that the company has $3.97 million in assets as of June 30, 2017. Among that, the company has $466,000 in current assets.

The following page is a bank statement from Chase Bank demonstrating EVIO, Inc. has on deposit $3,618,551.08 as of February 28,2018.

Construction to Startup Project Schedule

EVIO Labs MA is staring a testing facility in Framingham, MA. Below is the timeline for operations:

July 2018 - Secure facility, execute lease, hire contractors, complete state application

August 2018 - Attain permits, Complete buildout, enhance HVAC system, update electrical, tenant improvements, install furnishings, security system, and equipment

September 2018 - Complete inspections, validate equipment, begin accepting samples by September 15.

Our operating schedule has three categories: permitting and licensing, design and construction, and preparation for lab operations.

We are in the process of preparing the space for testing by installing necessary furnishings, and installing testing and security equipment. We will attain all needed building inspections including fire at that time. We have attained ISO 17025 accreditation and apply for permanent state licensing. Our goal is to begin testing in the Framingham location by September 1. No cannabis will be allowed onsite until we have been fully permitted to handle cannabis.

Details of production capacity

EVIO Labs anticipates that full compliance testing will commence on or before September 1, 2018. We will ramp up operations to serve the needs by installing and implementing the needed instruments and staff to meet the local and regional demand for testing.

Full compliance testing means that one test references a test of one batch of product. One "test" as described below may include a panel of tests including tests for potency, pesticides, microbiological or residual solvent screening, heavy metals, and foreign matter.

Initial installed capacity will be for 20 samples per day, or approximately 460 samples per month. When we exceed these projections, we will add additional equipment and personnel to support the added test volume.

To meet the needs of full testing, we will initially require one high-capacity instrument for each test type and sufficient trained staff to operate each process.

Each test represents approximately one batch of cannabis flower, extract, concentrate or infused edible product.

Compliance with Local and State Laws

EVIO shall remain in compliance with all the rules specified in the current, and any revisions to Municipal and state rules, as applicable. The plans submitted with the application demonstrate the company's commitment to adhering to the rules, and EVIO Labs will continue to work closely with City of Framingham to provide feedback to new rules as they develop in order to ensure a thriving cannabis industry while protecting public health and safety.

EVIO Labs shall also operate in compliance with any Commonwealth's Guidelines for the Security and Non-Diversion of cannabis Grown for Medical Use, and specifically section IV Guidelines Regarding Collectives and Cooperatives. As the State rolls out its new rules EVIO Labs shall adhere to all State rules as they are expected to develop over the coming years.

At a federal level, EVIO Labs intends to operate to the spirit of the now defunct Cole Memo, which is enveloped by Cannabis Commission rules. We also operate in compliance with applicable rules set forth by EPA and OSHA. We also look to the FDA for guidance on certain methods.

EVIO Labs will not take any action that may cause any violation of Massachusetts' cannabis laws or otherwise jeopardize the ability of this facility to operate in the City of Framingham. EVIO shall only acquire, receive, produce, prepare, or compound medical cannabis or medical cannabis products from a company or individual who has the lawful right to possess and test cannabis.

EVIO Labs will maintain and take reasonable steps to assure this compliance with state and local laws by prohibiting:

1. Diversion of medical cannabis to anyone who is not a licensed and permitted facility;
2. Transporting or otherwise sending or directing medical cannabis outside the Commonwealth;
3. Access to the facility and products to persons under the age of 21;
4. Any activities or associating with any criminal enterprises, gangs, or cartels;
5. The use of its status as a medical cannabis facility as a cover or pretext for the trafficking of other illegal drugs or other illegal activity; and
6. The use of violence or firearms in the manufacturing and/or distribution of cannabis.

Additionally, EVIO Labs represents that the following rules shall be enforced to meet this compliance, such as:

1. Advising customers, employees and/or agents to never engage in the prohibited activities;
2. Prohibiting the use or consumption of cannabis on the property;
3. Advising employees and/or agents to refrain from driving and/or operating heavy machinery while under the influence of cannabis;
4. Properly assuring that cannabis product meets required labeling, packaging and is maintained in secure facility in order to avoid diversion;
5. Maintaining proper security measures to prevent the potential for illicit activity and crime; and
6. Maintaining compliance with all local and state laws applicable to the licensing and permitting of this laboratory.

EVIO Labs through its counsel and consultants will continuously monitor updates to federal, state, and local cannabis laws and regulations to ensure all operations are compliant with applicable laws.

Labs Should Test Only Lawfully Cultivated cannabis

EVIO Labs should acquire cannabis only from licensed distributors, or as allowed, collectives, or individuals such as cannabis patients who are otherwise lawfully permitted to possess cannabis. To help prevent diversion of cannabis EVIO Labs will carefully track and record the source and destination of all cannabis that comes to the lab for testing or research.

Cannabis Sales are Prohibited

EVIO Labs strictly prohibits the transaction of any cannabis product. EVIO Labs is a service provider only, and will test samples of product given to the lab as a part of the service. Cannabis or cannabis waste product shall not be sold from in any form.

Possession Guidelines

EVIO Labs shall be in possession of cannabis samples only for the purpose of testing. Remaining cannabis will be destroyed in accordance with waste disposal guidelines, or returned to the testing client, as allowed by law.

Security

EVIO Labs shall provide adequate security to ensure that employees and customers are safe and that the surrounding homes or businesses are not negatively impacted by nuisance activity such as loitering or crime. Further, to maintain security, prevent fraud, and deter robberies, EVIO Labs shall keep accurate records and follow accepted cash handling practices, including regular bank runs and cash drops, and maintain a general ledger of cash transactions.

Refer to the security plan for details.

Operational Plan

Background

The Cannabis Control Commission provides a statutory framework for the licensing of commercial cannabis testing labs within the Commonwealth of Massachusetts. Previously, the lab operated under the direction of the Department of Public Health, and will continue to adhere to the requirements of both organizations.

The EVIO Labs Quality Policies

EVIO Labs maintains a Quality Manual and associated policies that enforce the Laboratory's objective to produce technically defensible laboratory test results that accurately and precisely describe the sample for the purpose of reporting to the client. The Laboratory is committed to routinely performing laboratory work in conformance to ISO 17025 and the TNI Standard (2003 and 2009), resulting in the overall improvement in laboratory quality over time. Demonstration of the laboratory's commitment to reach its objective will result in the following

- Adequately staffed and equipped laboratory facilities,
- Successful participation in the proficiency testing program operated by an accredited provider,
- Successful implementation of an ISO 17025 compliant quality system
- Annual internal audits with management review,
- Successful biennial assessments by the Accreditation Program,
- Timely reporting of laboratory test results to appropriate regulating authorities/clients,
- Laboratory test results that are supported by quality control data and documented laboratory testing procedures.
- Continual improvement of the quality system through program monitoring and assessment

The quality policy is communicated to employees during the training of new hires. It is understood, implemented, and maintained by employees at all levels. This is documented by management through the employee evaluation process, the training procedure, the internal audit process, and the document control process. The technical director shall ensure that the lab's policies and objectives for quality of testing services are documented in the Quality Manual. The technical director shall assure that the Quality Manual is communicated to, understood, and implemented by all personnel concerned. Documentation includes signed statements in each analyst's training file.

Quality System

The quality system defined in the quality manual applies to all personnel who perform activities affecting quality. All employees are responsible for the quality system. The quality system applies to all activities affecting data realization whether at permanent facilities, sites away from permanent facilities, or any mobile or temporary facilities.

Through a formal documented system of planned activities, the quality system meets the relevant requirements of ISO guide 17025. EVIO also goes above and beyond the ISO requirements by implementing requirements from the NELAC TNI 2009 Standard for Laboratories. The quality manual is maintained current and up-to-date by the Quality Manager (QAO) to reflect changes to the system. The laboratory defines it policy for each applicable standard element in the quality manual. For each element, as appropriate, the laboratory has documented procedures that further describe how the specific policy objectives and goals are met. The quality manual references these documented procedures. Where applicable, work instructions are referenced in the documented procedures and the quality manual.

Quality procedures and instructions are implemented as written. The procedures explain how the laboratory implements the standard requirements in accordance with its quality policy. They are revised, as necessary, to reflect the actual objectives, flow of tasks, and staff responsibilities.

Work instructions are maintained in the laboratory methods manual. They specify the equipment, resources and skills required, what tests and verifications will be performed to measure process and product quality, the records and written documentation used by personnel, and standards of acceptability. Work instructions are approved by the affected managerial staff and are maintained in the document control system

The EVIO Labs "Playbook" and Standard Operating Procedures

EVIO Labs has developed a guide to EVIO Labs operations that we call our "Playbook". This is a governing document that includes reference to our extensive set of policies and operating procedures. The policies, procedures, and training materials below have been implemented in all our labs, and have been prepared to be compliant to ISO 17025 and TNI 2009.

Document Name

2018 Employee Handbook -California, Massachusetts, Nevada, And Oregon
Data Integrity And Ethics Training PowerPoint
EVIO MA Organizational Chart
EVIO.100.010 EVIO Labs Playbook
MA Price Sheet 2018 V2
ORELAP-SOP-001 Protocol for Collecting Samples of Usable Marijuana
ORELAP-SOP-002 Protocol for Collecting Samples of Cannabinoid Concentrates, Extracts, and Products
Personal Security And Crime Prevention Training
POL.100.010 Client Data Privacy Policy
POL.100.020 Maintaining Client Confidentiality
POL.200.010 Sample Acceptance Policy
POL.300.010 Electronic Signature Policy
POL.400.010 Ethics Policy and Code of Conduct
POL.500.010 Laboratory Safety Training Manual
POL.600.010 Internal Research Policy
POL.S.90.010 Accounts Receivable Collection
SOP.H.30.010 Project Management Procedures
SOP.M.10.010 Lab Opening Procedures
SOP.M.10.011 Video Surveillance Setup And Operation
SOP.M.10.020 Prevention Of Laboratory Cross Contamination
SOP.M.10.030 Cleaning Labware
SOP.M.10.040 Operation Of Bottletop Dispenser
SOP.M.10.050 Operation And Maintenance Of Fume Hoods
SOP.M.10.060 Operation Of Scale
SOP.M.10.070 Operation Of Restek Centrifuge
SOP.M.10.070 Unannounced Inspections
SOP.M.10.080 Method For Odor Containment

SOP.M.20.010 Approval Of Vendors
SOP.M.20.020 Ordering And Receiving Supplies
SOP.M.20.030 Receipt And Storage Of Equipment And Supplies
SOP.M.30.001 Support Equipment
SOP.M.30.010 Changing The Gc Column
SOP.M.30.020 HPLC Maintenance
SOP.M.30.021 Operation And Calibration Of Hp 1050 Hplc Dad
SOP.M.30.030 Operation And Calibration Of Micropipettors
SOP.M.50.010 Traceability Of Samples, Reagents, Standards And Supplies
SOP.M.50.011.DEN Autoclave Use And Maintenence
SOP.M.50.011.MAS Autoclaving
SOP.M.50.020 Use Of Secondary Containers
SOP.M.50.080 General Waste Disposal Procedures
SOP.M.70.010 Security Procedures
SOP.QA.100.010 Corrective And Preventive Actions
SOP.QA.40.001 Document and Record Control Procedures
SOP.QA.400.010 Writing An SOP
SOP.QA.400.020 Use Of Laboratory Notebooks
SOP.QA.400.060 PowerDMS
SOP.QA.500.010 Data Integrity Management
SOP.QA.500.010 Data Integrity Procedure
SOP.QA.600 Management Review
SOP.QA.700 Nonconforming Work
SOP.S.10.010 Marketing Communications Procedures
SOP.S.20.021.MA Massachusetts FAQs
SOP.S.90.010 Accounts Receivable Collection
SOP.T.00.000 SOP Template
SOP.T.01.001 Promium Element LIMS Procedures
SOP.T.01.001.MAS EVMA LIMS Procedures
SOP.T.10.020 Sample Intake Procedures
SOP.T.20.010 Procedures For Sampling
SOP.T.20.011 Procedure For Sampling Industrial Hemp
SOP.T.20.020 Sample Handling Storage And Preservation
SOP.T.20.020.MAS Sample Handling, Storage, And Preservation
SOP.T.20.021 Laboratory Sample Tracking
SOP.T.20.022 Basic METRC Procedures
SOP.T.30.010 Photographing Samples
SOP.T.30.011.MAS PCR - DNA Extraction For Qpcr
SOP.T.30.012.MAS qPCR For Microbial Contaminant Testing
SOP.T.30.020 Homogenization Of Cannabis Samples
SOP.T.30.030 Sample Weighing Procedures
SOP.T.30.040 Sample Drying
SOP.T.30.050 Sample Preparation for Cannabinoid Quantification via High Pressure Liquid Chromatography

SOP.T.30.051 Unique Matrix Validation Procedures
SOP.T.30.052.MAS Sample Preparation For Heavy Metals Analysis Via Icp-Ms.Pdf
Sop.T.30.052.Sbh Sample Preparation For Heavy Metals Analysis Via Icp-Ms.Pdf (2)
SOP.T.30.060 Pesticide Analysis Preparation For Cannabis And Cannabinoid Extracts And Concentrates (Repaired)
SOP.T.30.061 Quechers Pesticide Analysis Preparation (Krl)
SOP.T.40.001 Assessment For Effectiveness W Key
SOP.T.40.010 Moisture Content via Loss on Drying
SOP.T.40.011 Water Activity Measurement Procedures
SOP.T.40.013 Filth And Foreign Material Inspection
SOP.T.40.020 Cannabinoid Quantitation via High Pressure Liquid Chromatography
SOP.T.40.022 Hplc Water And Mobile Phase Prep
SOP.T.40.023 Cannabinoids via HPLC (Acetonitrile)
SOP.T.40.023.MAS Cannabinoids Analysis Via HPLC
SOP.T.40.026 QC Material Preparation and Characterization
SOP.T.40.027 Cannabinoid LCS-LCS Duplicate Procedures
SOP.T.40.030 Residual Solvent Analysis via GCFID
SOP.T.40.031 Residual Solvents via HS-GC-MS
SOP.T.40.040 Rapid Yeast And Mold
SOP.T.40.040.MAS Rapid Yeast and Mold
SOP.T.40.041 E. Coli And Coliforms Enumeration via Petrifilm
SOP.T.40.042 Salmonella Presence Determination Via 3M Express System
SOP.T.40.043 PCR Microbiological Pathogen Screening Via Real-Time PCR
SOP.T.40.050 Pesticide Analysis via Shimadzu GCMS-TQ8040
SOP.T.40.051 Pesticides Analysis via LC-MSMS
SOP.T.40.051.MAS Enterobacteriaceae
SOP.T.40.052.MAS Rapid Coliform
SOP.T.40.053.MAS Aerobic Count
SOP.T.40.080.MAS Ochratoxin A Testing
SOP.T.40.090 Terpenoid Analysis via HS-GC-FID And HS-GC-MS
SOP.T.40.090.MAS Aflatoxin Testing With Aflacheck
SOP.T.40.100 General Procedures For Handling Subcontracted Analyses
SOP.T.40.50.MAS Heavy Metals Analysis Via ICP-MS
Sop.T.40.50.Sbh Heavy Metals Analysis Via Icp-Ms
SOP.T.80.020 Estimating Uncertainty
SOP.T.80.021Use Of Control Charts For QC Monitoring
SOP.T.90.010 Data Review and Reporting
SOP.T.90.010.Sbh Data Review And Reporting
SOP_Reporting End Of Quarter WIP from LIMS
TNI And ISO Requirements

Testing Laboratories - Statement of Purpose, Problem, Rationale and Benefits

The Bureau of Cannabis Control makes clear that the protection of the public is paramount. In keeping with that, the bureau developed procedures for ensuring that all medical cannabis goods are tested prior to delivery to a dispensary for retail sale. All cannabis goods be tested by testing laboratories licensed by the bureau for a variety of attributes for the protection of the public. Through the proposed testing Bureau of Cannabis Control, Testing Laboratories Initial Statement of Reasons laboratory regulations, the bureau aims to ensure the medical cannabis goods offered for sale are safe for human consumption. The bureau also aims to ensure medical cannabis patients receive accurate information regarding the medical cannabis goods they consume. First, the MCRSA requires the bureau, with assistance from the CDPH, to develop health protective levels for moisture content, contaminants, residual solvents, microbiological impurities, and foreign material. Consumable medical cannabis goods are at risk of contamination similar to other consumable products. Contamination may occur during various stages of the cultivation, harvest, extraction, processing, and packaging processes. Some of the types of contamination that can make a medical cannabis good unsafe involves pesticides, residual solvents and processing chemicals, microbiological impurities, heavy metals, and foreign material. These proposed regulations aim to set forth action levels that the bureau considers are both protective of public health and achievable by industry. The proposed exposure limits are necessary to ensure, to the extent feasible, that no medical cannabis patient will suffer material impairment of health from exposure to contaminants in medical cannabis goods. As such, these contaminants are discussed in greater detail:

- Chemicals, Microbiological impurities, Mycotoxins, Foreign Materials & Heavy Metals

Sampling

Proper sampling collection may be far more consequential than laboratory measurement errors. If a sample of something is improperly obtained, the measurement data that is gathered through analyzing the sample puts the measurement data it produces into question. Proper sampling is therefore critical to obtaining relevant and valid data.

In these regulations, the Bureau proposes fairly detailed minimum sampling requirements. These requirements include what must go into a testing laboratory's sampling protocol, training requirements for laboratory agents who will be obtaining samples ("samplers"), and how samples are to be stored. The proposed sampling regulations also make specific the MCRSA provision that requires the laboratory agent collecting the sample to use a "statistically valid sampling method." A statically valid sampling method is necessary to ensure that the medical cannabis goods samples accurately and precisely represent the characteristics of the batches from which they were taken.

Method Validation

An analytical procedure is developed to test a defined characteristic of a substance against established acceptance criteria for that characteristic. This is called a "method," or a "test." To ensure the method used results in reliable, valid data, the method must be "validated" before it is used to produce usable results. Method validation is a process by which a method is tested to ensure it is producing valid results.

Because it is only fairly recently that cannabis has been a substance that is tested for impurities by laboratories, and because the federal government does not regulate this industry, there are few validated methods for the testing of cannabis. Therefore laboratories will have to validate their own methods for the testing of medical cannabis.

The laboratory's analytical instrumentation and methodology is selected based on the intended purpose and scope of the analytical method. Parameters that may be evaluated during method development are specificity, linearity, limits of detection (LODs) and limits of quantitation (LOQs), range, accuracy, and precision.

These proposed regulations set out what the bureau considers to be acceptable ways to validate a "nonstandard" method, which will be used for testing medical cannabis goods. In developing these proposed method-validation regulations, the bureau looked to guidelines and other resources used in other industries.

Quality Assurance

Quality assurance is a set of operating principles that enable laboratories to produce defensible data of known accuracy and precision. These operating principles form a laboratory quality system and are documented in a laboratory's quality-assurance manual. These regulations propose the minimum components of a quality-assurance program and what must be contained in the quality-assurance manual.

The Bureau's proposed quality-assurance program includes requirements for quality control samples. The bureau proposes to require the use of method blank samples, field duplicate samples, and matrix spike samples (or laboratory control samples). The proposed regulations also set out how to calculate the limit of detection and limit of quantitation. They also spell out recordkeeping requirements and require an annual internal audit. Together these proposed regulations will assist in providing accurate testing and guidance for how to ensure accurate testing.

The Bureau is also proposing required proficiency testing. Proficiency testing is a blind testing of a laboratory's ability to perform analyses. The bureau proposes requiring testing laboratory licensees participate in a proficiency testing carried out by an ISO 17025 accredited laboratory so that every analyst and every method used by the laboratory is eventually tested. This is an important check on the ability of laboratories to provide accurate data.

Personnel

The education and experience level of the personnel of a testing laboratory is very important. Many of the required tests in these proposed regulations are complex and must be done by persons with specialized training. Therefore, the bureau proposes in these regulations to require testing laboratories licensed by the bureau to have a laboratory director. It is also proposed that analysts and supervisory analysts meet some minimum qualifications. This is done to ensure laboratories are run by competent and trained persons, to ensure accurate testing, and to ensure public safety.

Applicable Rulemaking - Testing Laboratories:

500.160: Testing of Marijuana and Marijuana Products

(1) No marijuana product, including marijuana, may be sold or otherwise marketed for adult use that is not capable of being tested by Independent Testing Laboratories, except as allowed under 935 CMR 500.000. Testing of marijuana products shall be performed by an Independent Testing Laboratory in compliance with the Protocol for Sampling and Analysis of Finished Medical Marijuana Products and Marijuana-infused Products, as amended in November, 2016, published by the DPH. Testing of environmental media (e.g., soils, solid growing media, and water) shall be performed in compliance with the Protocol for Sampling and Analysis of Environmental Media for Massachusetts Registered Medical Marijuana Dispensaries published by the DPH.

(2) A Marijuana Establishment shall have a written policy for responding to laboratory results that indicate contaminant levels are above acceptable limits established in the DPH protocols identified in 935 CMR 500.160(1). Any such policy

shall include notifying the Commission within 72 hours of any laboratory testing results indicating that the contamination cannot be remediated and disposing of the production batch. The notification must be from both the Marijuana Establishment and the Independent Testing Laboratory, separately and directly. The notification from the Marijuana Establishment must describe a proposed plan of action for both the destruction of the contaminated product and the assessment of the source of contamination.

(3) A Marijuana Establishment shall maintain the results of all testing for no less than one year;

(4) The sale of seeds is not subject to these testing provisions.

(5) Clones are subject to these testing provisions, but are exempt from testing for metals.

(6) All transportation of marijuana to and from Independent Testing Laboratories providing marijuana testing services shall comply with 935 CMR 500.105(13).

(7) All storage of marijuana at a laboratory providing marijuana testing services shall comply with 935 CMR 500.105(11); 935 CMR: CANNABIS CONTROL COMMISSION 500.160: continued

(8) All excess marijuana must be disposed in compliance with 935 CMR 500.105(12), either by the Independent Testing Laboratory returning excess marijuana to the source Marijuana Establishment for disposal or by the Independent Testing Laboratory disposing of it directly; and

(9) No marijuana product shall be sold or otherwise marketed for adult use that has not first been tested by an Independent Testing Laboratory and deemed to comply with the standards required under 935 CMR 500.160.

The EVIO Staffing Plan

EVIO, Inc. was founded in August, 2014, by Lori Glauser and William Waldrop. In 2017, EVIO acquired Viridis Analytics, LLC, which is now dba EVIO Labs MA.

The lab currently employs four people with shared roles. At this time, the lab employs a Laboratory Director who is responsible for the production of lab results and coordinate activities with laboratory technicians. The lab also employs one analyst, one technician, and one person responsible for sales and administration. The lab director reports to EVIO's VP of operations who works remotely for EVIO Corporate. He reports to Lori Glauser and William Waldrop

We anticipate the lab will increase staff to 11 within one year and up to 16 in two years. The staff will include additional analysts, technicians, samplers, quality assurance, and account managers, and administrative personnel.

Regular business hours are Monday - Friday 9 am - 6 pm. cali

EVIO enforces alcohol, smoke, and drug-free workplace as described in the Employee Handbook.

Staffing records are maintained in accordance with 935 CMR 500.105(9).

Applicable Rulemaking:

EVIO maintains the following personnel records:

1. Job descriptions for each employee and volunteer position, as well as organizational charts consistent with the job descriptions;

2. A personnel record for each marijuana establishment agent. Such records shall be maintained for at least 12 months after termination of the individual's affiliation with the Marijuana Establishment and shall include, at a minimum, the following:

a. all materials submitted to the Commission pursuant to 935 CMR 500.030(2);

b. documentation of verification of references;

c. the job description or employment contract that includes duties, authority, responsibilities, qualifications, and supervision

d. documentation of all required training, including training regarding privacy and confidentiality requirements, and the signed statement of the individual indicating the date, time, and place he or she received said training and the topics discussed, including the name and title of presenters;

e. documentation of periodic performance evaluations;

f. a record of any disciplinary action taken; and

g. notice of completed responsible vendor and eight-hour related duty training.

Qualifications and Training of Staff

EVIO Staff are trained upon hire. Our training program is tailored to each position, the qualifications of each are described below.

EVIOs training program comprises the following elements:

1. Onboarding training, to familiarize employee with the Employee Handbook, general corporate policies and procedures, ethics training, data integrity training, and sensitivity/sexual harassment and inclusion training.
2. General laboratory training, which includes an overview of laboratory procedures, document control, state and local laws and regulations, and quality standards and requirements.
3. Job specific training, which includes methods and use of instruments, analytical procedures, and job-specific standard operating procedures.

Our trainings involve a combination of one on one training, self-directed training, online courses and assessments, classroom/group training and seminars. Training logs are maintained, and assessments including online quizzes, supervisor/trainer assessments, demonstrations of capability are administered to demonstrate skill and compliance.

The job descriptions of the day to day lab staff are below:

Laboratory Director

Job purpose

The Laboratory Director is responsible for overseeing the technical operations of one or more of our labs, and ensuring the production of accurate and timely test results to our customers.

The Lab Director will apply his or her experience working with gas and liquid chromatography, microbiological analysis, and other chemistry methods to perform required tests and implement and enforce EVIO's standard operating procedures. The lab director will meet regulatory, customer and quality system requirements.

Advises subordinates to meet schedules and/or resolve technical problems. Interacts with peer labs and coordinates the program activities with responsibility for results in terms of costs, methods, and employees. Implements and improves quality management programs and procedures.

Lab directors who excel in their position may be promoted to regional lab director, or to executive management.

Duties and responsibilities

- Ensure that test orders are completed in an accurate and in a timely manner
- With guidance from VP of Operations, oversee and direct the technical personnel and scientific methods of the laboratory.
- Provide guidance as requested regarding hiring, training, promotions, and disciplinary issues for technical personnel.

- Ensure that the testing laboratory achieves, maintains, and improves as needed quality standards and appropriate laboratory accreditation.
- Provide consulting services as appropriate
- Develop analytical methods for chemistry-based, genetic, and microbiological assays

· Ensure that personnel are properly trained in quality procedures, operating procedures (SOP's) and equipment specific requirements.

· Compile and prepare reports and analyses setting forth progress, adverse trends, and appropriate recommendations or conclusions as requested by executive management.

· Maintain equipment and supply inventory, recommend purchases.

· Assist in formulating and implementing the short and long-range goals for laboratory; set priorities, assign responsibilities, and establish timetables. Project future needs and formulate strategies consistent with projections.

· Plan and schedule work for the group to ensure proper distribution of assignments as well as adequate manning, space, and facilities for subsequent performance of duties.

· Represent the laboratory in technical interactions with the customer base and partner labs.

- Consult with clients and government regulators
- Coordinate with customer service team to proactively respond to customer complaints and inquiries
- Implement solutions to quality problems through inspections, investigations, and audits
- Maintain quality checks on safety of laboratories, including biohazards and insure appropriate maintenance of the facilities.
- Coordinate the functions and operations of the laboratories with peer laboratories.
- Encourage project/process designs that simplify compliance with quality requirements
- Comply with record keeping requirements
- Perform other related duties incidental to the work described herein.

The above statements describe the general nature and level of work being performed. This is not intended to be an exhaustive list of all responsibilities and duties.

Qualifications

- Technical competence in analytical chemistry or microbiology
- HPLC experience preferred· GC experience preferred· MS experience preferred· Headspace sampling experience preferred
- Microbiological experience (plating, e.coli, salmonella) preferred
- Experience in evaluating instrumentation a plus
- Excellent verbal and written communication skills including technical writing· Detail-oriented
- Experience in computer database and Microsoft Office applications
- Ability to provide excellent customer service, manage others, and collaborate with remote lab personnel
- Ability to work independently under remote supervision.

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Should have bachelor's degree in the chemical, environmental, biological sciences, physical sciences or engineering, with at least twenty-four college semester credit hours in chemistry and at least two years of experience in the environmental analysis of representative inorganic and organic analytes for which the laboratory seeks or maintains accreditation.

Technical Director of Chemistry

- Prepare samples for analysis in accordance with EVIO SOPs
- Perform analysis of samples for potency, pesticide residues, residual solvents, and/or heavy metals, in accordance with state testing rules.
- Provide day to day oversight of lab operations.
- Perform Post-intake Sample Management:
- Monitor samples from intake through retention and disposal.
- Oversee subsampling tasks and check that it is being performed properly.
- Continuously improve analysis and reporting functions
- Perform data review, analysis, and reporting

Technical Director of Microbiology

- Prepare samples for analysis for mold, yeast, mildew, e. coli, salmonella, mycotoxins, or other microbiological contaminants, in accordance with EVIO SOPs and state testing rules.
- Provide day to day oversight of microbiological lab operations.
- Perform Post-intake Sample Management:
- Monitor samples from intake through retention and disposal.
- Oversee subsampling tasks and check that it is being performed properly.
- Continuously improve analysis and reporting functions
- Perform data review, analysis, and reporting

Any technical manager engaged in microbiological or biological analysis shall be a person with a bachelor's degree in microbiology, biology, chemistry, environmental sciences, physical sciences or engineering with a minimum of sixteen college semester credit hours in general microbiology and biology and at least two years of experience in the environmental analysis of representative analytes for which the laboratory seeks or maintains accreditation.

A master's or doctoral degree in one of the above disciplines may be substituted for one year of experience.

A person with an associate's degree in an appropriate field of the sciences or applied sciences, with a minimum of four college semester credit hours in general microbiology may be the technical manager(s) of a laboratory engaged in microbiological analysis limited to fecal coliform, total coliform, E. coli, and standard plate count. Two years of equivalent and successful college education, including the microbiology requirement, may be substituted for the associate's degree. In addition, each person shall have one year of experience in microbiological analyses.

Laboratory Technician

Job purpose

Reporting to the Laboratory Director, Laboratory Testing Technicians prepare samples of plant, concentrate, and edible products for analysis. Lab work involves measuring and tracking samples, preparing sample dilutions, completing logs, maintaining hygienic lab conditions including washing labware. Technicians may also be required to interpret analytical data, prepare and review reports,

work with the Laboratory Director to perform experiments and method validations. The lab technician will use software systems including Laboratory Information Management Systems (LIMS), as well as office tools.

Duties and responsibilities

Sample Intake:

- Receive samples and confirm appropriate receipt conditions
- Enter the samples into the LIMS
- Complete all necessary intake documentation

Sample Preparation for Analysis:

- The technician prepares samples in accordance with the associated method SOPs. The following are tasks necessary for sample preparation:
  - Homogenizations
  - Weighing
  - Extractions
  - Dilutions

Daily Opening Procedures:

- Temperature logs for refrigerators, freezers, and incubators (as applicable)
- Scale calibration verifications
- Stocking consumables
- Cleaning labware
- General tidiness throughout the lab space

For more advanced technicians, the following may be included in their daily tasks:

- Sample Analysis using HPLC, GC, GC/MS, etc.
- Sample Reporting
- Manage inventory and ordering of materials
- Other laboratory quality management tasks

Other duties and tasks may be determined by the laboratory director or supervisor.

Qualifications

Must be 21 years of age.
Laboratory Technicians must hold a bachelor's degree in one of the chemical or biological sciences from an accredited college or university or have completed at least 2 years of college coursework from an accredited college or university and at least 1 year of full-time, non-education-related practical experience in a laboratory performing analytical scientific testing in which the testing methods are or were recognized by an accrediting body.
Background check required.

*These qualifications may vary by state according to their determined regulations on employee education requirements.

Laboratory QA Officer

The quality assurance officer has responsibility for the quality system and its implementation. The QAO has direct access to the highest level of management at which decisions are taken on lab policy and/or resources, and to the technical director. When the QAO is not present, a deputy shall be appointed.

In accordance with TNI, The laboratory's quality manager and/or his/her designee(s) shall:

a) serve as the focal point for QA/QC and be responsible for the oversight and/or review of quality control data;

b) have functions independent from laboratory operations for which they have quality assurance oversight;
c) be able to evaluate data objectively and perform assessments without outside (e.g., managerial) influence;
d) have documented training and/or experience in QA/QC procedures and the laboratory's quality system;
e) have a general knowledge of the analytical methods for which data review is performed;
f) arrange for or conduct internal audits as per Section 4.14 annually;
g) notify laboratory management of deficiencies in the quality system; and
h) monitor corrective actions.

NOTE: Where staffing is limited, the quality manager may also be the technical manager.

Reporting to Director of Operations

- Report/file any corrective actions/preventative actions and customer feedback
- Report failed samples to OHA with help of lab director.
- Maintain employee training files. Ensure staff is completely trained on SOPs, maintain DOC documents.
- Enter document change requests to the online "personnel resources" section of eviolabs.com for any SOPs that do not reflect the methods used in the lab
- Complete corrective action reports and preventative action reports (also submit online via "personnel resources")
- Review all outbound transfer manifests and shipments. Ensure that the manifest matches samples in the outbound batch. Make a copy of the transfer manifest and file.
- Perform data review for solvents and terpenes as directed
- Review completed certificates prior to release. Review reported data vs. instrument sheets, final certificate vs. subcontracted certs,
- Report test fails in accordance with rules simultaneously with customer report delivery.
- Maintain data packages for samples. Ensure that all sample intake forms, transfer manifests, and lab data packages are complete and organized in a manner that anyone in the lab can easily access data for any sample.
- Maintain Quartzy and order supplies. Ensure equipment IDs have been entered into quartzy.
- Enter test results into METRC for client reporting.
- Maintain lab logs such as fridge temp, scale calibrations, etc.
- Respond to regulatory data requests
- Ensure all documents are properly backed up and retained in accordance with TNI document retention requirements.
- Monitor QMS and training slack channels.
- As needed, arrange for hazwaste pickup, gas supply, water delivery.
- Ensure the office area you work in is organized and tidy so people can find archival documents, SOPs and regulations.
- Perform any micro analyses if requested.

Laboratory Administrator

Duties include:

- Reception

- Customer Support:
- Notify clients proactively of known issues such as testing delays or reported fails.
- Communicate sampling schedule to team so the lab can schedule resources and be prepared for intakes.
- Make bank deposits.
- Ensure that visitors to the lab complete visitor log.
- Track and handle office expenses and receipts. Send petty cash receipt purchases to accounting

Intake support, in accordance with SOPs

- Ensure that orders are properly entered into laboratory information systems and accounting systems.. Ensure that the entries are consistent.
- Schedule sampling appointments
- Handle in-lab transactions, (cash, check, credit card)
- Manage sample throughput including accepting samples, creating transport manifests.
- Perform first phase of intake:
    - Take orders, print order form and have client sign it.
    - Create payment receipt, or invoice if the client is on terms.
- Ensure all inbound samples have been verified in CC and imaged
- Organize samples prior to analysis.
- Complete transfer manifests.
- Collect receivables
- As training and accreditation allows, perform basic tests such as water activity.
- Perform duties of sampler (in-house) once trained.

Sampler

- Perform field sampling in accordance with EVIO SOPs, sampling training, and state rule
- Create and maintain sampling schedules with distributors. Communicate planned departure/arrival times with the labs.
- Complete all required sampling paperwork
- Receive and verify transport manifests, prepare transport container.
- Take and record temperature of the samples prior to leaving.
- Ensure that the subsample containers are completely labeled with sample number, test type, and weight of contents.
- Provide lab completed and fully signed transport manifests. Ensure copies are left with lab and bring documents with shipment.
- Assist staff with entering data to order entry system
- Receive payments from customers.

Sales

Reporting to the President of sales, responsible for engaging in customer relationships and maximizing revenue.

Responsibilities:

- Develop and grow customer relationships
- Develop plans and strategies for developing business and achieving the company's sales goals
- Create a culture of success and ongoing business and goal achievement
- Manage the sales teams, operations and resources to deliver profitable growth
- Manage the use of budgets
- Define optimal sales force structure
- Hire and develop sales staff
- Define and oversee sales staff compensation and incentive programs that motivate the sales team to achieve their sales targets
- Define and coordinate sales training programs that enable staff to achieve their potential and support company sales objectives
- Manage customer expectations and contribute to a high level of customer satisfaction
- Define sales processes that drive desired sales outcomes and identify improvements where and when required
- Put in place infrastructure and systems to support the success of the sales function
- Provide detailed and accurate sales forecasting
- Compile information and data related to customer and prospect interactions
- Monitor customer, market and competitor activity and provide feedback to company leadership team and other company functions
- Work closely with the marketing function to establish successful support, channel and partner programs
- Manage key customer relationships and participate in closing strategic opportunities
- Travel for in-person meetings with customers and partners and to develop key relationships

- Communicate with clients throughout the testing process to minimize the number of calls going to the lab.
- Notify clients proactively of known issues such as testing delays or reported fails.
- Communicate sampling schedule to team so the lab can schedule resources and be prepared for intakes.

Supply Chain

Cannabis samples are tracked from seed to sale, including through the cannabis testing lab. Until a seed-to-sale tracking system system is in place, we perform tracking through the following mechanisms. All of our cannabis tracking is based on creating unique identifiers of each sample, and the weight of each sample. The unique identifiers are traceable to the source batch of product.

- Chain of custody forms to track samples from the point of origin (the distributor), to the lab.
- Any cannabis that is transported to our site is tracked on a Transport Manifest.
- Once in the lab, or If R&D samples are dropped in the lab, we track samples via chain of custody form within the lab.
- Retention samples are tracked on retention sample logs. This allows us to identify all samples that remain in storage after testing.
- Waste disposal log is used to track the destruction of cannabis waste.

EVIO Labs is a service provider to the industry, and therefore does not perform transactions of goods. EVIO Labs performs analytical testing on samples of cannabis product, primarily from distributors.

Our product is information. Any samples provided to EVIO Labs are destroyed in the testing process. As allowed, we may return surplus cannabis product to the tester. We maintain chain of custody and full product traceability for every gram of cannabis product in our labs through a track and trace system as described below.

Cannabis Track & Trace

As required by state rule, each sample that arrives at our lab shall be identified with a unique code that is associated with a batch of cannabis product. Our customer will logically transmit the samples to our lab through the state-approved Track and Trace system upon transport. Once the samples arrive at our lab, we inspect the samples, and accept the samples into the system, and verify the weight of the samples. Once we are completed testing, and the end of the required retention period is complete, we will dispose of any remaining sample. Used or destroyed samples are then indicated as such in the track and trace system. If there are instances where material leaves the lab and is returned to the provider, lab personnel will update the system accordingly, and the recipient receives the transported material.

More detail about our Track and Trace methodology is provided in our standard operating procedures SOP.T.20.020 Sample Handling and SOPM.50.080 Waste Management.

Until a track and trace system is in place, the lab will use a log-based tracking system as described above.

Applicable Rulemaking:

935 CMR 500.105 (8) Inventory.
(b) Real-time inventory shall be maintained as specified by the Commission and in 935 CMR 500.105(8)(c) and (d), including, at a minimum, an inventory of marijuana plants; marijuana plant-seeds and clones in any phase of development such as propagation, vegetation, and flowering; marijuana ready for dispensing; all marijuana products; and all damaged, defective, expired, or contaminated marijuana and marijuana products awaiting disposal.
(c) A Marijuana Establishment shall:
1. Establish inventory controls and procedures for the conduct of inventory reviews, and comprehensive inventories of marijuana products in the process of cultivation, and finished, stored marijuana;
2. Conduct a monthly inventory of marijuana in the process of cultivation and finished, stored marijuana;
3. Conduct a comprehensive annual inventory at least once every year after the date of the previous comprehensive inventory; and
4. Promptly transcribe inventories if taken by use of an oral recording device.

(d) The record of each inventory shall include, at a minimum, the date of the inventory, a summary of the inventory findings, and the names, signatures, and titles of the individuals who conducted the inventory.

(e) A Marijuana Establishment shall tag and track all marijuana seeds, clones, plants, and marijuana products, using a seed-to-sale methodology in a form and manner to be approved by the Commission.

Storage, Distribution & Transportation

EVIO Labs will not distribute cannabis products to third parties. Any samples that are delivered to the lab will be consumed during the testing process, and ultimately destroyed via our waste management procedures.

EVIO Labs has developed extensive storage, distribution, and transportation procedures for cannabis samples. Refer to SOP T.20.020 - Sample Handling and Storage, and SOP.T.20.30 - Documenting and Storing Retention Samples.

Sec 9-495 (b)(1)(ii) requires: all cannabis and cannabis products shall be stored in a secured and locked room, safe, or vault, and shall be kept in a manner as to prevent diversion, theft, and loss.

EVIO Labs intends to store all usable cannabis that is in its possession onsite in refrigerators located in a locked room, which is central to the lab. The locked room will be accessible only from within the limited access area, and have its own secure entrance. We anticipate having two storage refrigerators, and storage freezer. The first refrigerator will be a staging location for incoming samples. The second refrigerator will be storage for samples that are in progress, and for laboratory standards that require refrigeration. We will also have a freezer where we will store the remains of completely tested samples for retention of 90 days or longer. After the required retention time is complete, any remaining sample material will be destroyed and disposed of in accordance with state and local rule.

1. **Onsite Warehousing Capacity:**

We anticipate that our total warehousing capacity will rarely exceed 2 pounds of cannabis product at any given time, although we will ensure we have sufficient capacity to store up to ten pounds of product if needed. There will be no offsite warehousing.

It should be noted that once samples arrive at the lab, they are removed from retail packaging and homogenized (ground up). Samples bound for testing will typically be introduced to a chemical solution. Remaining sample material is retained in sample packages in our secure refrigerators. In this state, the product is generally unappealing or unusable, so risk of diversion is low.

EVIO Labs Costa Mesa does not have plans to locate offsite warehouses.

2. Transportation Policy

Summary of Responses

7(g)(vi)(3) EVIO Labs Costa Mesa will start with one sampling vehicle, and expects to ramp up to three vehicles.

7(g)(vi)(4) The vehicle types will be either personal vehicles (such as Toyota Prius), or small utility vans, such as Ford Transit Connect

7(g)(vi)(5) EVIO Labs is not at this time contemplating the use of a third party transport company to transport samples.

DUTIES OF THE GENERAL MANAGER

The general manager will be responsible for developing, implementing and maintaining transportation procedures that ensure compliance. The general manager will also be responsible for hiring, training, and outsourcing transportation personnel.

The Transportation Procedures establish that the General Manager will be responsible for approving all deliveries coordinated by the transportation personnel. The General Manager will also be responsible for hiring, training, and/or outsourcing transportation personnel. Provisions are included to ensure that only employees or contractors who are authorized to transport cannabis will transport products on behalf of the company.

EMPLOYEE TRAINING

The Transportation Plan describes policies and procedures for delivery of product in compliance with state law and regulations.

Both the policies and training guides will be reviewed at least annually, and will be updated within 3 days of notice by any regulatory agency of any change in rule or procedure that may affect the procedures or training. Employees will be informed of any updates to procedures, and notified as soon as practicable of any changes to laws or rules as it may affect their duties.

Additional provisions address procedures to ensure adequate shipment verification, transport manifests, loading areas, route planning, cargo theft prevention measures, two-way communication, and required transportation reporting. A Transportation Manager is assigned responsibility for ensuring the reporting of all transportation events in the Transportation Event Log.

PROCEDURES

Culture of safety

All employees shall be trained in accordance with the Training Plan. All managers shall develop and foster a culture of safety. All employees must receive regular security, anti- diversion, and transportation training updates or refreshers including a focus on cargo theft risk awareness.

Employees shall also be trained to work safely, and to maintain discretion whenever transporting, or give the appearance of transporting, cannabis products or cash. Employees shall immediately contact the appropriate authorities as well as the General Manager should any adverse or threatening event occur.

TRIP PLANNING

Prior to beginning any trip, a trip plan that is indicated with transport manifest shall be developed. Notwithstanding the foregoing, a transport vehicle may make stops at multiple facilities or laboratories, as appropriate, to deliver cannabis.

7(g)(vi) Number and Types of Vehicles Used

EVIO Labs will have at least one delivery vehicle for use by our sampling staff to pick up samples. As the demand grows, we may have up to three transport vehicles assigned to the Costa Mesa lab. the vehicles will be unmarked vehicles similar to a Ford Transit Connect:

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When transporting relatively small quantities of cannabis products, for instance less than two pounds of product, the dispensary will use discreet employee or company vehicles that have a secure locked container for storing product during transport.

In the unlikely event we will need to transport larger quantities of cannabis product or cash in excess of $10,000, we plan to use the services of a third-party secure transportation company that is licensed for such deliveries.

LOADING AND UNLOADING IN SECURE ENCLOSED AREA
Product prepared for transport shall be loaded within the enclosed secure area out of public sight for the loading and unloading of cannabis into and from a transport vehicle

Except as provided in subsection (h), a delivery team shall proceed in a transport vehicle from the dispensary, where the cannabis is loaded, directly to the cannabis organization, where the cannabis is unloaded, without unnecessary delays. Notwithstanding the foregoing, a transport vehicle may make stops at multiple facilities, as appropriate and as allowed by rule, to deliver cannabis.

The quantity of cannabis products transported shall be indicated on the transport manifest. At no time shall there be a variation in quantity of cannabis transported with the manifest.

Global Tracking System

Transport vehicles should be equipped with global positioning monitoring systems that can be monitored to ensure safe, efficient delivery of the cannabis to a cannabis organization. Such tracking systems will also be a deterrent for diversion of cannabis product.

Secure locking cargo area or lockbox
Our transport vehicles must be equipped with a secure lockbox or locking cargo area.

Discreet vehicles
The vehicles shall have no markings that would identify or indicate that the vehicle is being used to transport cannabis.

Product cannot be visible from outside
cannabis stored inside the transport vehicle may not be visible from the outside of the transport vehicle.

Temperature Controlled
The vehicles shall be capable of being temperature-controlled for perishable cannabis

Current documentation
The vehicles shall at all times display current State inspection and registration stickers. Transport vehicles shall also be at all times insured by an amount that is commercially reasonable and appropriate.

DELIVERY TEAM REQUIREMENTS

Safe driving policy
Our teammembers will adhere to the highest standards of safety. Our company will verify driving records upon hire, and ensure that transport personnel have a history of safe driving.

Communications
Each delivery team member shall have access to a cellular telephone at all times while on route.

Driver licensing and Identification Requirements
Each delivery team member shall have a valid driver's license, plus any additional identification required to indicate they are an employee of a licensed cannabis testing lab..

Each delivery team member shall carry an identification badge or card at all times and shall, upon demand, produce it to the Commission, law enforcement, or other Federal, State or local government officials if necessary to perform the government officials' functions and duties.

While on duty, a delivery team member may not wear clothing or symbols that may indicate ownership or possession of cannabis.

Evidence of theft, diversion or discrepancy during transport.

The transportation manager and general manager, in coordination with information from law enforcement and utilizing third-party security advisors, will identify "security risk geographies" with respects to local crime rate, educational system, political and legal conditions hindering or supporting cargo theft. Any vehicle accidents, diversions, losses, or other reportable incidents that occur during transport will be reported to the Commission and local law enforcement immediately.

If an employee or contractor finds evidence of, or reasonably suspects, a theft or diversion of cannabis during transport, the employee or contractor shall immediately report its findings or suspicions to the general manager, who will immediately report the incident to authorities, as appropriate.

Evidence of adverse loss during transport

If upon receipt of a delivery of cannabis from a cannabis organization discovers a discrepancy in the transport manifest upon delivery, the lab shall refuse acceptance of the delivery and immediately report the discrepancy to the delivering entity, and as required, regulatory authorities including law enforcement.

If an employee or contractor discovers a discrepancy in any transport manifest, the employee shall:

1. Notify the General Manager.
2. The General Manager will direct an investigation. Such an investigation may involve the following actions:
    a. Interview the delivery team and any other employees involved in the transfer to determine if there was an error made during the preparation of the Transport Manifest.
    b. Notify the counterparty to the Transport Manifest (for instance the grower/processor) of the discrepancy. Interview the counterparty to establish route cause of the discrepancy.
    c. Prepare any corrective actions if necessary
2. If it is deemed that an employee or contractor was negligent, disciplinary action up to and including termination will be considered.
3. The General Manager or his assignee may amend the transportation standard plan of operation, if necessary, to prevent future discrepancies between the quantity or description of inventory listed in the transport manifest and the quantity or description of inventory delivered.

If an employee or contractor experiences theft or loss of cannabis product:

1. Call 911 if there is an emergency or threatening situation
2. Contact the General Manager or Security Manager designated to handle such situations
3. The Lab Director, General Manager or Security Manager will immediately inform the appropriate law enforcement agency and the Commission.
4. If police are dispatched, wait for the police in a safe location
5. Take any photographs that may be helpful to the police investigation
6. Give a statement to the police and comply with any requests
7. Complete an incident report that describes the incident and any losses for internal use. Include copies of any police report or reports necessary to report to the Commission.

ACCIDENTS

A laboratory shall report to the Commission any vehicle accidents that are involved during a delivery of cannabis product.

The procedure for handling accidents should one occur:

1. The driver should immediately call the Police Department as allowed by state rules to report the accident and any injuries.
2. Be aware of your surroundings and assess personal safety. Maintain discretion regarding informing only those who are required to know that there is cannabis product in the vehicle.
3. Exchange insurance information with any other drivers involved.
4. Take photos of the accident and any damage caused by the accident, including of other vehicles.
5. If police are dispatched, wait for the Police to arrive in a safe location
6. Provide a state to the police and comply with any requests
7. Contact the general manager to report the incident
8. Call the Management Agent that is designated to handle such situations within

Allow for Inspections

A transport vehicle is subject to inspection by law enforcement, or other Federal, State or local government officials if necessary to perform the government officials' functions and duties. A transport vehicle may be stopped and inspected along its delivery route or at any cannabis organization.

TRANSPORT OF CASH

Until such time that Federal banking rules allow for deposits of cash from cannabis establishments, it is also likely that the company will transport cash. The company take the similar precautions for transporting cash as we do cannabis products.

The company will also make every effort to ensure that cash that is transported, for instance to a bank or to make payments to vendors, shall be transported separately from cannabis products. Transports of cash in excess of $10,000 shall be avoided, and when necessary multiple deliveries shall be scheduled.

TRANSPORT MANIFEST

A transport manifest shall be generated whenever transporting cannabis samples or products. This manifest

will typically be generated by an electronic information system, however the company will also provide, and train employees, to complete a manual transport manifest should there be any failures of the electronic system.

The electronic system chosen will be one that works with the Division's state level tracking system, for instance METRC.

The company shall generate a printed or electronic transport manifest that accompanies every transport vehicle and contains at least the following information:

(1) The name, address and permit number of the grower/processor and the name of and contact information for a representative of the grower/processor who has knowledge of the transport.

(2) The name, address and permit number of the cannabis organization or laboratory receiving the delivery and the name of and contact information for a representative of the cannabis organization.

(3) The quantity, by weight or unit, of each cannabis batch or lot contained in the transport, along with the identification number for each batch or lot.

(4) The date and approximate time of departure.

(5) The date and approximate time of arrival.

(6) The transport vehicle's make and model and license plate number.

(7) The identification number of each member of the delivery team accompanying the transport.

(b) When a delivery team delivers cannabis to multiple cannabis organizations, the transport manifest must correctly reflect the specific cannabis in transit. Each recipient shall provide the dispensary with a printed receipt for the cannabis received.

(c) All cannabis being transported shall be packaged in shipping containers and labeled in accordance with § 1151.34 (relating to packaging and labeling of cannabis; and labels and safety inserts).

(d) A dispensary shall provide a copy of the transport manifest to the recipient receiving the cannabis described in the transport manifest. To maintain confidentiality, a grower/processor may prepare separate manifests for each recipient.

(e) A lab shall, if requested, provide a copy of the printed transport manifest, and any printed receipts for cannabis being transported, to the Commission or its authorized agents, law enforcement, or other Federal, State or local government officials if necessary to perform the government officials' functions and duties.

Working with Transportation Service Providers

At this time, EVIO Labs is not contemplating working with third party transportation providers. If allowed by State Rule, and the general manager chooses to engage the services of a third-party transportation service provided if approved by the board of directors and the Commission. The general manager must ensure the TTSP acts in compliance with this section and all applicable laws. The general manager must ensure any TTSP engaged to provide transportation services has, at a minimum:

1. Sufficient insurance as determined by the board of directors and as required by rule;

2. Limited claims experience;

3. Positive references;

4. Significant operating history or the equivalent in an experienced management team;

5. Financial security;

6. Sufficient resources to meet contract terms; and

7. Evidence of an effective ongoing compliance program.

Applicable Rulemaking:

935 CMR.500.105 (13) Transportation Between cannabis Establishments.

(a) General Requirements.

1. A licensed cannabis Establishment shall, as an element of its license, be licensed to transport its cannabis products to other licensed establishments, except as otherwise provided herein.

2. cannabis products may only be transported between licensed cannabis Establishments by registered cannabis establishment agents.

3. A licensed cannabis Transporter may contract with a licensed cannabis Establishment to transport that licensee's cannabis products to other licensed cannabis Establishments.

4. The originating and receiving licensed cannabis Establishments shall ensure that all transported cannabis products are linked to the seed-to-sale tracking program. For the purposes of tracking, seeds and clones will be properly tracked and labeled in a form and manner determined by the Commission.

5. Any cannabis product that is undeliverable or is refused by the destination cannabis Establishment shall be transported back to the originating establishment.

6. All vehicles transporting cannabis products shall be staffed with a minimum of two cannabis establishment agents. At least one agent shall remain with the vehicle at all times that the vehicle contains cannabis or cannabis products.

7. Prior to leaving a cannabis Establishment for the purpose of transporting cannabis products, the originating cannabis Establishment must weigh, inventory, and account for, on video, all cannabis products to be transported.

8. Within eight hours after arrival at the destination cannabis Establishment, the destination establishment must re-weigh, re-inventory, and account for, on video, all cannabis products transported.

9. When videotaping the weighing, inventorying, and accounting of cannabis products before transportation or after receipt, the video must show each product being weighed, the weight, and the manifest.

10. cannabis products must be packaged in sealed, labeled, and tamper or child-resistant packaging prior to and during transportation.

11. In the case of an emergency stop during the transportation of cannabis products, a log must be maintained describing the reason for the stop, the duration, the location, and any activities of personnel exiting the vehicle.

12. A cannabis Establishment or a cannabis Transporter transporting cannabis products shall ensure that all transportation times and routes are randomized.

13. A cannabis Establishment or a cannabis Transporter transporting cannabis products shall ensure that all transport routes remain within the Commonwealth.

14. All vehicles and transportation equipment used in the transportation of cannabis products or edibles requiring temperature control for safety must be designed, maintained, and equipped as necessary to provide adequate temperature control to prevent the cannabis products or edibles from becoming unsafe during transportation, consistent with applicable requirements pursuant to 21 CFR 1.908(c).

(b) Reporting Requirements.

1. cannabis establishment agents must document and report any unusual discrepancy in weight or inventory to the Commission and law enforcement authorities not more than 24 hours of the discovery of such a discrepancy.

2. cannabis establishment agents shall report to the Commission and law enforcement authorities any vehicle accidents, diversions, losses, or other reportable incidents that occur during transport, not more than 24 hours of such accidents, diversions, losses, or other reportable incidents.

(c) Vehicles.

1. A vehicle used for transporting cannabis products must be:

a. owned or leased by the cannabis Establishment or the cannabis Transporter;

b. properly registered, inspected, and insured in the Commonwealth (documentation of such status shall be maintained as records of the cannabis Establishment or the cannabis Transporter, and shall be made available to the Commission upon request);

c. equipped with an alarm system approved by the Commission; and

d. equipped with functioning heating and air conditioning systems appropriate for maintaining correct temperatures for storage of cannabis products.

2. cannabis products must not be visible from outside the vehicle.

3. Any vehicle used to transport cannabis products shall not bear any markings indicating that the vehicle is being used to transport cannabis products, and any such vehicle shall not indicate the name of the cannabis Establishment or the cannabis Transporter.

4. When transporting cannabis products, no other products may be transported or stored in the same vehicle. 5. No firearms may be located within the vehicle or on a cannabis establishment agent.

(d) Storage Requirements.

1. cannabis products must be transported in a secure, locked storage compartment that is a part of the vehicle transporting the cannabis products.

2. The storage compartment must be sufficiently secure that it cannot be easily removed.

3. If a cannabis Establishment, pursuant to a cannabis Transporter License, or a cannabis Transporter is transporting cannabis products for more than one cannabis Establishment at a time, the cannabis products for each cannabis Establishment shall be kept in a separate locked storage compartment during transportation and separate manifests shall be maintained for each cannabis Establishment.

4. If a cannabis Establishment is transporting cannabis products to multiple other establishments, it may seek the Commission's permission to adopt reasonable alternative safeguards.

(e) Communications.

1. Any vehicle used to transport cannabis products shall contain a global positioning system (GPS) monitoring device that is: a. not a mobile device that is easily removable;

b. attached to the vehicle at all times that the vehicle contains cannabis products;

c. monitored by the cannabis Establishment or cannabis Transporter during transport of cannabis products; and

d. spected by the Commission prior to initial transportation of cannabis products, and after any alteration to the locked storage compartment.

2. Each cannabis establishment agent transporting cannabis products shall have access to a secure form of communication with personnel at the originating location at all times that the vehicle contains cannabis and cannabis products.

3. Secure types of communication include, but are not limited to: a. two-way digital or analog radio (UHF or VHF); b. cellular phone; or c. satellite phone.

4. When choosing a type of secure communications, the following shall be taken into consideration: a. cellular signal coverage; b. transportation area; c. base capabilities; d. antenna coverage; and e. frequency of transportation.

5. Prior to, and immediately after leaving the originating location, the cannabis establishment agents shall use the secure form of communication to contact the originating location to test communications and GPS operability.

6. If communications or the GPS system fail while on route, the cannabis establishment agents transporting cannabis products must return to the originating location until the communication system or GPS system is operational.

7. The cannabis establishment agents transporting cannabis products shall contact the originating location when stopping at and leaving any scheduled location, and regularly throughout the trip, at least every 30 minutes.

8. The originating location must have a cannabis establishment agent assigned to monitoring the GPS unit and secure form of communication, who must log all official communications with cannabis establishment agents transporting cannabis products.

(f) Manifests.

1. A manifest shall be filled out in triplicate, with the original manifest remaining with the originating cannabis Establishment, a second copy provide to the destination cannabis Establishment upon arrival, and a copy to be kept with the licensed cannabis establishment agent during transportation and returned to the cannabis Establishment or cannabis Transporter upon completion of the transportation.

2. Prior to transport, the manifest shall be securely transmitted to the destination cannabis Establishment by facsimile or email.

3. Upon arrival at the destination cannabis Establishment, a cannabis establishment agent at the destination cannabis Establishment shall compare the manifest produced by the agents who transported the cannabis products to the copy transmitted by facsimile or email. This manifest must, at a minimum, include; a. the originating cannabis Establishment name, address, and registration number; b. the names and registration numbers of the agents who transported the cannabis products; c. the name and registration number of the cannabis establishment agent who prepared the manifest; d. the destination cannabis Establishment name, address, and registration number; e. a description of the cannabis products being transported, including the weight and form or type of product; f. the mileage of the transporting vehicle at departure from originating cannabis Establishment and mileage upon arrival at destination cannabis Establishment, as well as mileage upon return to originating cannabis Establishment; g. the date and time of departure from originating cannabis Establishment and arrival at destination cannabis Establishment for each transportation; i. a signature line for the cannabis establishment agent who receives the cannabis products; j. the weight and inventory before departure and upon receipt; k. the date and time that the transported products were re-weighed and reinventoried; l. the name of the cannabis establishment agent at the destination cannabis Establishment who re-weighed and re-inventoried products; and m. the vehicle make, model, and license plate number.

4. The manifest shall be maintained within the vehicle during the entire transportation process, until the delivery is completed.

5. A cannabis Establishment shall retain all transportation manifests for no less than one year and make them available to the Commission upon request.

(g) Requirements for Agents.

1. Each employee or agent transporting or otherwise handling cannabis products for a cannabis Transporter must be registered as a cannabis establishment agent and have a driver's license in good standing issued by the Massachusetts Registry of Motor Vehicles for all classes of vehicle the cannabis establishment agent will operate for the cannabis Transporter prior to transporting or otherwise handling cannabis products.

2. A cannabis establishment agent shall carry his or her registration card at all times when transporting cannabis products, and shall produce his or her registration card to the Commission or law enforcement officials upon request.

(h) cannabis Transporters shall use best management practices to reduce energy and water usage, engage in energy conservation and mitigate other environmental impacts.

Waste Management Plan

Cannabis Test Labs will have nominal amounts of cannabis waste. However for the small amount of waste generated will be handled in accordance with all state and local cannabis waste disposal laws and as described herein, and in accordance with EVIO Standard Operating Procedures, including all track and trace of waste.

Refer to *EVIO General Waste Disposal Procedures SOP.M.50.080 Rev 2.0*, which is included in this application.
Note that our procedures may change as regulations evolve.

Applicable rulemaking for waste disposal:

935 CMR 500.105 (12) Waste Disposal.

(a) All recyclables and waste, including organic waste composed of or containing finished cannabis and cannabis products, shall be stored, secured, and managed in accordance with applicable state and local statutes, ordinances, and regulations.

(b) Liquid waste containing cannabis or by-products of cannabis processing shall be disposed of in compliance with all applicable state and federal requirements, including but not limited to, for discharge of pollutants into surface water or groundwater (Massachusetts Clean Waters Act, M.G.L. c. 21 §§ 26 through 53; 314 CMR 3.00: Surface Water Discharge Permit Program; 314 CMR 5.00: Groundwater Discharge Program; 314 CMR 12.00: Operation Maintenance and Pretreatment Standards for Wastewater Treatment Works and Indirect Dischargers; the Federal Clean Water Act, 33 U.S.C. 1251 et seq., the National Pollutant Discharge Elimination System Permit Regulations at 40 CFR Part 122, 314 CMR 7.00: Sewer System Extension and Connection Permit Program), or stored pending disposal in an industrial wastewater holding tank in accordance with 314 CMR 18.00: Industrial Wastewater Holding Tanks and Containers.

(c) Organic material, recyclable material and solid waste generated at a Cannabis Establishment shall be redirected or disposed of as follows:

1. Organic material and recyclable material shall be redirected from disposal in accordance with the waste disposal bans described at 310 CMR 19.017: Waste Bans.

2. To the greatest extent feasible:

a. Any recyclable material as defined in 310 CMR 16.02: Definitions shall be recycled in a manner approved by the Commission; and

b. Any remaining cannabis waste shall be ground and mixed with other organic material as defined in 310 CMR 16.02: Definitions such that the resulting mixture renders the cannabis unusable for its original purpose. Once such cannabis waste has been rendered unusable, the mixture may be composted or digested at an aerobic or anaerobic digester at an operation that is in compliance with the requirements of 310 CMR 16.00: Site Assignment Regulations for Solid Waste Facilities.

3. Solid waste containing cannabis waste generated at a cannabis establishment may be ground up and mixed with solid wastes such that the resulting mixture renders the cannabis unusable for its original purposes. Once such cannabis waste has been rendered unusable, it may be brought to a solid waste transfer facility or a solid waste disposal facility (e.g., landfill or incinerator) that holds a valid permit issued by the appropriate state agency in the state in which the facility is located; or

(d) No fewer than two cannabis Establishment Agents must witness and document how the cannabis waste is disposed or otherwise handled (recycled, composted, etc.) in accordance with 935 CMR 500.105(12). When cannabis products or waste is disposed or handled, the cannabis Establishment must create and maintain a written or electronic record of the date, the type and quantity disposed or handled, the manner of disposal or other handling, the location of disposal or other handling, and the names of the two cannabis Establishment Agents present during the disposal or other handling, with their signatures. cannabis Establishments shall keep these records for at least three years. This period shall automatically be extended for the duration of any enforcement action and may be extended by an order of the Commission.

Energy Efficiency and Conservation.

Although testing labs have relatively low energy use compared to other facilities, such as cultivation facilities EVIO is dedicated to energy efficiency and conservation.

(a) Identification of potential energy use reduction opportunities and a plan for implementation of such opportunities;

The laboratory will implement energy efficiency measures including use of LED lights, use of motion sensors to turn lights off after hours or in vacant rooms or offices, and to ensure that instruments that are out of service are disconnected from power supplies.

(b) Consideration of opportunities for renewable energy generation, including, where applicable, submission of building plans showing where energy generators could be placed on the site, and an explanation of why the identified opportunities were not pursued, if applicable;

The laboratory energy draw is too low to make renewable energy generation an economic option at this time. If the landowner chooses to implement renewable energy generation on the site, we will participate in any such programs.

(c) Strategies to reduce electric demand (such as lighting schedules, active load management, and energy storage);

The laboratory will operate during standard working hours, so load shifting and adjusting lighting schedules would not be applicable to the lab.

(d) Engagement with energy efficiency programs offered pursuant to M.G.L. c. 25, § 21, or through municipal lighting plants.

At this time, the laboratory is not eligible for most commercial energy efficiency programs offered by municipalities or utilities. It would also not be cost beneficial for us to participate in demand response programs, as our energy load is flat throughout the day, and service disruptions would adversely impact our business. That said, we will participate with the utility and municipality for any programs that do arise.

Oregon, California, Nevada, Massachusetts

2018 EMPLOYEE HANDBOOK

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INTRODUCTION

WELCOME TO EVIO LABS!

Thanks for joining us! The Company would like you to feel that your employment with us will be mutually beneficial and enjoyable.

You are joining EVIO Labs, a subsidiary of EVIO, Inc., that has established an outstanding reputation for quality products and services. Credit for this goes to every one of our employees and we hope that you will find satisfaction and take pride in your work here.

HISTORY

EVIO, Inc. (formerly Signal Bay, Inc.) was founded in 2014 by Lori Glauser and William Waldrop in Las Vegas, NV. The company got its start by providing consulting services to the emerging cannabis industry. In 2015, EVIO acquired its first cannabis testing lab in Bend, OR. The company has since grown by acquiring labs in Oregon, California, Massachusetts, and Colorado. We also have a licensee arrangement with a lab in Florida.

MISSION AND VISION

EVIO Labs is a nationwide network of accredited laboratories dedicated to providing high quality analytical and consulting services with superior customer service. We conduct regulatory testing on cannabis and cannabis products to ensure the safety of medical and recreational products for consumers.

EVIO, Inc. will continue to grow, adding additional testing laboratories in both the US and abroad, and provide value added advisory services in the areas of compliance, research and development, and business services. By providing career opportunities, rewarding performance, and creating a dynamic and fulfilling work environment, we encourage our people to excel. The future of The Company has people at its core, for they are our most valued resource.

HANDBOOK PURPOSE

This employee handbook is presented as a matter of information and has been prepared to inform employees about the Company's philosophy, employment practices, policies, and the benefits provided to our valued employees, as well as the conduct expected from them. While this handbook is not intended to be a book of rules and regulations or a contract, it does include some important guidelines which employees should know. Except for the at-will employment provisions, the handbook can be amended at any time.

This employee handbook will not answer every question employees may have, nor would the Company want to restrict the normal question and answer interchange among us. It is in our person-to-person conversations that we can better know each other, express our views, and work together in a harmonious relationship.

We hope this guide will help employees feel comfortable with us. The Company depends on its employees; their success is our success. Please don't hesitate to ask questions. Every manager will gladly answer them. We believe employees will enjoy their work and their fellow employees here. We also believe that employees will find the Company a good place to work.

No one other than authorized management may alter or modify any of the policies in this employee handbook. No statement or promise by a supervisor, manager, or designee is to be interpreted as a change in policy, nor will it constitute an agreement with an employee.

Should any provision in this employee handbook be found to be unenforceable and invalid, such a finding does not invalidate the entire employee handbook, but only the subject provision. Nothing in this handbook is intended to infringe upon employee rights under Section 7 of the National Labor Relations Act (NLRA) or be incompatible with the NLRA.

We ask that employees read this guide carefully, become familiar with the Company and our policies, and refer to it whenever questions arise.

EMPLOYMENT

EQUAL EMPLOYMENT

It is the policy of the Company to provide equal employment opportunities to all qualified individuals and to administer all aspects and conditions of employment without regard to the following:

- Race
- Color
- Age
- Sex
- Sexual orientation
- Gender
- Gender identity and gender expression
- Religion, including dress and grooming practices
- National origin, including language use restrictions
- Pregnancy, childbirth, or breastfeeding
- Marital status
- Genetic information, including family medical history
- Physical or mental disability
- Military or veteran status
- Citizenship and/or immigration status
- Child or spousal support withholding
- Domestic violence, assault, or stalking victim status
- Medical conditions, including cancer and AIDS/HIV
- Denial of family or medical care leave
- Political activities or affiliations
- Lawful conduct or use of lawful products occurring during nonworking hours not on Company premises
- Use of a service animal
- Arrest record
- Opposing unlawful employment practices
- Wage garnishment for consumer debt
- Health insurance status
- Familial relations to another employee or former employee
- Filing for workers' compensation insurance
- Credit report or credit history
- Refusal to attend any Company-sponsored meeting with the primary purpose of communicating the employer's political or religious views
- Any other protected class, in accordance with applicable federal, state, and local laws

Discriminatory, harassing, or retaliatory behavior is prohibited from coworkers, supervisors, managers, owners, and third parties, including clientele. The Company takes

allegations of discrimination, harassment and retaliation very seriously and will promptly conduct an investigation when warranted.

Equal employment opportunity includes, but is not limited to, employment, training, promotion, demotion, transfer, leaves of absence and termination.

BACKGROUND CHECKS

Prior to making an offer of employment, or after making a conditional offer, the Company may conduct a job-related background check. The background check may consist of prior employment verification, professional reference checks, education confirmation, criminal background, and/or credit checks, as permitted by law (if permitted by AB 22 in California). Third-party services may be hired to perform these checks. All offers of employment and continued employment are contingent upon a satisfactory background check.

AT-WILL NOTICE

Employees are not hired for any definite or specified period even though employee wages are paid regularly. Employees are at-will with the Company and their employment can be terminated at any time, with or without cause and with or without prior notice. Company policy requires all employees to be hired at-will and this policy cannot be changed by any oral modifications. There have been no implied or verbal agreements or promises to an employee that they will be discharged only under certain circumstances or after certain procedures are followed. There is no implied employment contract created by this handbook or any other Company document or written or verbal statement or policy.

NEW EMPLOYEE ORIENTATION

New employees will have the opportunity to participate in an orientation program where you will be given a general overview of the Company and our policies, procedures, employee benefits, and operating conditions. You will be given time away from your duties to attend the orientation program which will be given by your supervisor on your first day of employment.

Equally important is getting to know your supervisor. Feel free to ask your supervisor any question you might have about pay, benefits, hours of work breaks, or anything else related to your job.

ANNIVERSARY DATE AND SENIORITY

The employee's date of hire is their official employment anniversary date. Seniority is the length of continuous service commencing on the date of hire at the Company. Should employees leave the Company's employment and then be rehired, previously accrued seniority will be forfeited and seniority will begin to accrue again on the date of rehire. With the exception of certain protected leaves and paid time off, seniority does not accrue during leaves of absence without pay or leaves of absence that exceed 30 calendar days.

IMMIGRATION LAW COMPLIANCE

All individuals hired by the Company will be required to establish and certify their identity and right to work in the United States. Each individual employed by the Company will be required to complete Section 1 of Form I-9 on their first day of employment, and produce, within three business days, proof of their identity and eligibility to work in the United States.

INTRODUCTORY PERIOD

The employee's first 90 days of employment with the Company are considered an introductory period. This introductory period will be a time for getting to know fellow employees, managers and the tasks involved in the position, as well as becoming familiar with the Company's products and services. The supervisor or manager will work closely with each employee to help them understand the needs and processes of their job.

This introductory period is a try-out time for the employee and the Company. During this introductory period, the Company will evaluate employees' suitability for employment and employees can evaluate the Company as well. At any time during this first 90 days, employees may resign. If, during this period, employee work habits, attitude, attendance, performance or other relevant factors do not measure up to our standards, the Company may terminate employment.

At the end of the introductory period, the supervisor or manager will discuss each employee's job performance with them. During the course of the discussion, employees are encouraged to give their comments and ideas as well.

Completion of the introductory period does not guarantee continued employment for any specified period of time, nor does it require that an employee be discharged only for cause. Completion of the introductory period also does not imply that employees now have a contract of employment with the Company, other than at-will. Successful completion of the introductory period does not alter the at-will employment relationship.

A former employee who has been rehired after a separation from the Company of more than one year is considered an introductory employee during their first 90 days following rehire.

EMPLOYMENT CLASSIFICATIONS

The Company has established the following employee classifications for compensation and benefit purposes only. An employee's supervisor or manager will inform the employee of their classification, status, and responsibilities at the time of hire, re-hire, promotion or at any time a change in status occurs. These classifications do not alter the employment at-will status.

Regular Full-Time Employee
An employee who is scheduled to work no less than 100% of the scheduled work hours in a workweek on a fixed work schedule (not less than 40 hours). The employee may be exempt or non-exempt and is generally eligible for all employment benefits offered by the Company.

Regular Part-Time Employee
An employee who is scheduled to work less than 40 hours in a workweek and may be eligible for some benefits.

Temporary Employee
An employee who is scheduled to work on a specific need of the Company. The employee will not receive any benefits unless specifically authorized in writing.

Exempt
Employees whose positions meet specific tests established by the Fair Labor Standards Act (FLSA) and applicable state law and who are exempt from overtime pay requirements. The basic premise of exempt status is that the exempt employee is to work the hours required to meet their work responsibilities.

Non-Exempt
Employees whose positions do not meet FLSA and state exemption tests and who are paid a multiple of their regular rate of pay for overtime hours worked. Unless notified otherwise in writing by management, all employees of the Company are non-exempt.

PERSONNEL RECORDS

The Company will maintain various employment files while individuals remain an employee of the Company. Examples of these files are employee personnel files, attendance files, I-9 files and files for medical purposes. If any changes with respect to personal information, such as a change in home address and telephone number or a change of name occur, employees are required to notify their supervisor or manager so the appropriate updates can be made to the files. The Company will take reasonable precautions to protect employee files and employee personally identifiable information in its records.

Employee files have restricted access. Employees, their supervisor or manager, or their designated agents, may have access to those personnel files. In the event that an employee (or former employee in California) wishes to review their personnel file, they must do so in the presence of a supervisor or manager. Employees may review their personnel file by making a written request to their supervisor or manager. The written request will become a permanent part of the personnel file.

EMPLOYEE REFERENCES

The Company makes strict provisions regarding information provided to people outside the Company for current and former employees. This information is restricted to the employment dates and positions held in the Company for that person. This is done to protect the Company and its employees. This information will only be released by authorized management.

JOB TRANSFERS

Management reserves its right to place employees where, and in whatever jobs it deems necessary. All job transfers, job changes, reassignments, promotions or lateral transfers are solely decided by the Company.

EMPLOYMENT OF RELATIVES

The Company does not have a general prohibition against hiring relatives. However, a few restrictions have been established to help prevent problems of harassment, safety, security, supervision and morale.

Close family members generally may not be hired or transferred into positions where they have access to sensitive information regarding a close family member, or if there is an actual or apparent conflict of interest (including but not limited to establishing an immediate supervisor/employee relationship).

These restrictions apply to the following degrees of relationships, whether established by blood, marriage, or other legal action: spouse, domestic partner (including parties to a civil union), child, step-child, parent, step-parent, sibling, grandparent, grandchild, parent-in-law, son-in-law, daughter-in-law, sister-in-law, brother-in-law, aunt, uncle, nephew, niece, cousin, or relations of the same degree of a domestic partner. This policy also applies to romantic relationships.

If marriage or other action creates these kinds of relationships, The Company reserves the right to request one of the employees affected give up that position by the end of the fiscal year or within six months from the date the relationship was established (whichever is the greater period). The employees will be permitted to determine which of them will resign. If the employees cannot make a decision, the Company will decide who will remain in the position. At the sole discretion of the Company, either or both of the employees may be allowed to transfer to other positions within the Company.

CONDUCT AND BEHAVIOR

GENERAL CONDUCT GUIDELINES

Orderly and efficient operation of the Company requires that employees maintain proper standards of conduct and observe certain procedures. These guidelines are provided for informational purposes only and are not intended to be all-inclusive. Nothing here is intended or will be construed to change or replace, in any manner, the at-will employment relationship between the Company and the employee. Nothing here is intended to infringe upon employee rights under Section 7 of the National Labor Relations Act (NLRA). The Company views the following as inappropriate behavior:

1. Failure to follow the policies outlined in this handbook.
2. Negligence, carelessness or inconsiderate treatment of Company clients and/or their matters/files.
3. Theft, misappropriation or unauthorized possession or use of property, documents, records or funds belonging to the Company, or any client or employee; removal of same from Company premises without authorization.
4. Divulging trade secrets or other confidential business information to any unauthorized person(s) or to others without an official need to know.
5. Obtaining unauthorized confidential information pertaining to clients or employees.
6. Changing or falsifying client records, Company records, personnel or pay records, including time sheets without authorization.
7. Willfully or carelessly damaging, defacing or mishandling property of a client, the Company or other employees.
8. Taking or giving bribes of any nature, or anything of value, as an inducement to obtain special treatment, to provide confidential information or to obtain a position. Acceptance of any gratuities or gifts must be reported to a supervisor or manager.
9. Entering Company premises without authorization.
10. Willfully or carelessly violating security, safety, or fire prevention equipment or regulations.
11. Unauthorized use of a personal vehicle for Company business.
12. Conduct that is illegal under federal, state, or local law.
13. Creating a disturbance on Company premises.
14. Use of abusive language.
15. Any rude, discourteous or un-businesslike behavior, on or off Company premises, which is not protected by Section 7 of the National Labor Relations Act (NLRA) and which adversely affects the Company services, operations, property, reputation or goodwill in the community or interferes with work.
16. Insubordination or refusing to follow instructions from a supervisor or manager; refusal or unwillingness to accept a job assignment or to perform job requirements.
17. Failure to observe scheduled work hours, failure to contact a supervisor or manager in the event of illness or any absence within 30 minutes of the scheduled start of work; failure to report to work when scheduled; abuse of sick leave or any other leave of absence.

18. Leaving the office during scheduled work hours without permission; unauthorized absence from assigned work area during regularly scheduled work hours.
19. Sleeping during regular working hours.
20. Recording time for another employee or having time recorded to or by another employee.
21. Use or possession of intoxicating beverages or illegal use or possession of narcotics, marijuana or drugs (under state, federal or local laws), on Company premises during working hours or reporting to work under the influence of intoxicants or drugs so as to interfere with job performance.
22. Unauthorized possession of a weapon on Company premises.
23. Illegal gambling on Company premises.
24. Soliciting, collecting money, vending, and posting or distributing bills or pamphlets during working hours in work areas. These activities are closely controlled in order to prevent disruption of Company services and to avoid unauthorized implication of Company sponsorship or approval. However, this general rule is not intended to hinder or in any way curtail the rights of free speech or free expression of ideas. Therefore, such activity by employees during non-working time, including meal and rest periods, is not restricted so long as such activity does not interfere with the orderly and regular conduct of the Company business, is lawful, in good taste, conducted in an orderly manner, and does not create safety hazards or violate general good housekeeping practices. Any person who is not an employee of the Company is prohibited from any and all forms of solicitation, collecting money, vending, and posting or distributing bills or pamphlets on Company property at all times.
25. Falsification of one's employment application, medical or employment history.

Failure to adhere to this policy may result in discipline, up to and including termination of employment.

SEXUAL AND OTHER UNLAWFUL HARASSMENT

Sexual harassment and unlawful harassment are prohibited behavior and against Company policy. The Company is committed to providing a work environment free of inappropriate and disrespectful behavior, intimidation, communications and other conduct directed at an individual because of their sex, including conduct that may be defined as sexual harassment.

Applicable federal and state law defines sexual harassment as unwanted sexual advances, requests for sexual favors, or visual, verbal, or physical conduct of a sexual nature when: (1) submission of the conduct is made a term or condition of employment; or (2) submission to or rejection of the conduct is used as basis for employment decisions affecting the individual; or (3) the conduct has the purpose or effect of unreasonably interfering with the employees work performance or creating an intimidating, hostile, or offensive working environment. The following list contains examples of prohibited conduct. They include, but are not limited to:

- Unwanted sexual advances;
- Offering employment benefits in exchange for sexual favors;
- Making or threatening reprisals after a negative response to sexual advances;
- Visual conduct such as leering, making sexual gestures, or displaying sexually suggestive objects, pictures, cartoons, or posters;
- Verbal conduct such as making or using derogatory comments, epithets, slurs, sexually explicit jokes, or derogatory comments about any employee's body or dress;
- Verbal abuse of a sexual nature, graphic verbal commentary about an individual's body, sexually degrading words to describe an individual, or suggestive or obscene letters, notes, or invitations;
- Physical conduct such as touching, assault, or impeding and/or blocking movements;
- Retaliation for reporting harassment or threatening to report harassment.

Sexual harassment on the job is unlawful whether it involves coworker harassment, harassment by a manager, or harassment by persons doing business with or for the Company, such as clients, customers or vendors.

Other Types of Harassment

Prohibited harassment on the basis of race, color, religion, national origin, ancestry, physical or mental disability, veteran status, age, or any other basis protected under local, state or federal law, includes behavior similar to sexual harassment, such as:

- Verbal conduct such as threats, epithets, derogatory comments, or slurs;
- Visual conduct such as derogatory posters, photographs, cartoons, drawings, or gestures;
- Physical conduct such as assault, unwanted touching, or blocking normal movement;
- Retaliation for reporting harassment or threatening to report harassment.

Retaliation

It is against Company policy and unlawful to retaliate in any way against anyone who has lodged a harassment complaint, has expressed a concern about harassment, including sexual harassment, or has cooperated in a harassment investigation. Therefore, the initiation of a complaint, in good faith, will not under any circumstances be grounds for disciplinary action.

Enforcement

All managers and supervisors are responsible for:

- Implementing the Company policy on harassment, which includes, but is not limited to, sexual harassment and retaliation;
- Ensuring that all employees they supervise have knowledge of and understand the Company policy;

- Reporting any complaints of misconduct to the designated company representative, the HR Administrator, so they may be investigated and resolved internally;
- Taking and/or assisting in prompt and appropriate corrective action when necessary to ensure compliance with the policy, and; Conducting themselves in a manner consistent with the policy.

Harassment Complaint Procedure

The Company's complaint procedure provides for an immediate, thorough and objective investigation of any claim of unlawful or prohibited harassment, appropriate disciplinary action against one found to have engaged in prohibited harassment, and appropriate remedies for any victim of harassment.

Anyone who has been subjected to the conduct prohibited under this policy, or who has knowledge of such conduct, should report this information following the normal Complaint Procedure as soon as possible. However, employees are not required to report any prohibited conduct to a supervisor who may be hostile, who has engaged in such conduct, who is a close associate of the person who has engaged in the conduct in question or with whom the employee is uncomfortable discussing such matters. Complaints regarding harassment or retaliation may be oral or in writing. Any individual who makes a complaint that is demonstrated to be intentionally false may be subject to discipline, up to and including termination.

All reported incidents of prohibited harassment will be promptly investigated. When the investigation is complete, a determination regarding the reported harassment will be made and communicated to the employee who complained and to the accused harasser. During the investigation, confidentiality will be preserved to the fullest extent possible without compromising the Company's ability to conduct a good faith and thorough investigation.

If the Company determines that prohibited harassment has occurred, the Company will take effective remedial action commensurate with the circumstances. Appropriate action will also be taken to deter any future harassment. If a complaint of prohibited harassment is substantiated, appropriate disciplinary action, up to and including discharge, will be taken.

The Company recognizes that actions that were not intended to be offensive may be taken as such. An employee who believes that they have been subjected to sexual harassment by anyone is encouraged, but not required, to promptly tell the person that the conduct is unwelcome and ask the person to immediately stop the conduct. A person who receives such a request must summarily comply with it and must not retaliate against the employee for rejecting the conduct. The Company encourages, but does not require, individuals to take this step before utilizing the above Complaint Procedure.

ABUSIVE CONDUCT

Abusive conduct means malicious conduct of an employer or employee in the workplace that a reasonable person would find hostile, offensive, and unrelated to an employer's legitimate business interests. Abusive conduct may include repeated infliction of verbal abuse, such as the use of derogatory remarks, insults, and epithets, verbal or physical conduct that a reasonable person would find threatening, intimidating, or humiliating, or the gratuitous sabotage or undermining of a person's work performance. A single act will generally not constitute abusive conduct, unless especially severe and egregious.

The Company considers abusive conduct in the workplace unacceptable and will not tolerate it under any circumstances. Employees should report any abusive conduct to a supervisor or manager with whom employees are comfortable speaking. Supervisors and managers are to assume the responsibility to ensure employees are not subjected to abusive conduct. All complaints will be treated seriously and investigated promptly. During the investigation process the Company will attempt to maintain confidentiality to the fullest extent possible.

It is a violation of Company policy to retaliate or otherwise victimize an employee who makes a complaint or a witness who serves in the investigation of the abusive conduct allegation.

COMPLAINT PROCEDURE

The Company subscribes to the open door policy. Employees may bring a particular complaint to their supervisor or manager for resolution. When matters cannot be handled on an informal basis, the Company has established a formal procedure for a fair review of any work related controversy, dispute or misunderstanding. A complaint may be brought by one or more employees concerning any work-related problem where the complaint has not been satisfactorily resolved in an informal manner. Employees may skip to Step 2 if the complaint is related to their supervisor or manager or if they feel they would not provide an impartial resolution to the problem.

<u>Step 1</u>

The complaint should be submitted in writing to a supervisor, manager or designee within three working days of the incident. A written request for a meeting must be submitted simultaneously. Generally, a meeting will be held within three working days of the employee's request depending upon scheduling availability. Witnesses will be allowed as necessary. If the problem is not resolved during this meeting the supervisor, manager or designee will give the employee a written resolution within three working days. If the employee is not satisfied, the employee may proceed to Step 2.

<u>Step 2</u>

If the employee is not satisfied after Step 1, the employee may submit a written request for review of the complaint and Step 1 solution to the HR Administrator or their designee. Such a request should be made within three working days following the receipt of the

Step 1 resolution. The HR Administrator or appointed representative will review the complaint and proposed solution and may call a further meeting to explore the problem. This meeting is to be attended by the employee concerned, the employee's supervisor or manager (if appropriate), and any other employee of the Company whom the aggrieved employee chooses. The HR Administrator or appointed representative will render the final decision within ten working days after receiving the Step 2 request, assuming scheduling availability. The decision will be given to the employee in writing and will become part of the employee's personnel file.

ANTI-RETALIATION AND WHISTLEBLOWER POLICY

In accordance with anti-retaliation and whistleblower protection regulations, the Company will not tolerate any retaliation against an employee who:

- Makes a good faith complaint, or threatens to make a good faith complaint, regarding the suspected Company or employee violations of the law, including discriminatory or other unfair employment practices;
- Makes a good faith complaint, or threatens to make a good faith complaint, regarding accounting, internal accounting controls, or auditing matters that may lead to incorrect, or misrepresentations in, financial accounting;
- Makes a good faith report, or threatens to make a good faith report, of a violation that endangers the health or safety of an employee, patient, client or customer, environment or general public;
- Objects to, or refuses to participate in, any activity, policy or practice, which the employee reasonably believes is a violation of applicable laws;
- Provides information to assist in an investigation regarding violations of the law; or
- Files, testifies, participates or assists in a proceeding, action or hearing in relation to alleged violations of the law.

Retaliation is defined as any adverse employment action against an employee, including, but not limited to, refusal to hire, failure to promote, demotion, suspension, harassment, denial of training opportunities, termination, or discrimination in any manner in the terms and conditions of employment.

DISCIPLINE

While it is never anticipated, employees of the Company may be disciplined, including suspension or discharge, for any action or behavior which the Company believes is contrary to its interest or the interests of its customers.

Occasionally, performance or other problems fall short of our standards and/or expectations. When this occurs, management takes action which, in its opinion, seems appropriate. The Company is not required to take any disciplinary action before making an adverse employment decision, including discharge. The Company reserves its prerogative to discipline, and the manner and form of discipline, at its sole discretion.

Disciplinary actions can range from a formal discussion with the employee about the matter to immediate discharge. Action taken by management in an individual case should not be assumed to establish a precedent in other circumstances.

Certain actions cannot be condoned and immediate discharge may occur. Some reasons for immediate termination include:

- Violation of any state or local law while on the job, including theft, harassment, sabotage or destruction of Company property.
- Fighting on the premises including any inappropriate arguing with any employee, customer, partner, or vendor.
- Abusive language or behavior
- Falsification of company documents
- Impairment from drugs or alcohol while on the job
- Divulging confidential information
- Intentionally ignoring or avoiding a customer or superior
- Abandoning the job

COMPENSATION

PAY PERIODS

The standard seven-day payroll workweek for the Company will begin at 12:00 a.m. Sunday. The designated pay period for all employees is semi-monthly. Paydays are on the 5th and the 20th of each month. Except as otherwise provided, if the pay date falls on a Saturday, pay day will default to the immediate preceding Friday. If the pay date falls on a Sunday, pay day will default to the following Monday. The monthly pay period from the 16th to the last day of each month will be paid on the 5th of the next month. The monthly pay period from the 1st – 15th will be paid on the 20th. Automatic deductions for such items as additional tax withholding and contributions to voluntary benefit plans may be arranged through the Human Resource Administrator.

TIMEKEEPING

All non-exempt employees are required to use the applicable timekeeping system available to record their hours worked. Non-exempt employees with access to time clocks are required to clock in/out for time off and other leave tracking purposes.

Employees should clock in no sooner than five minutes before their schedule shift and clock out no later than five minutes after their scheduled shift. Additionally, employees are required to clock in/out for their designated lunch periods. The length of the lunch period should have the agreement of the employee's manager. Lunch periods are unpaid time when employees are relieved of all duties. Waiver of the lunch period requires prior approval of the employee's manager. Under no circumstance may the waiver of the lunch period result in overtime work.

Should an employee miss an entry into the timekeeping system, the employee will notify their manager as soon as possible for correction. Employees may not ask another employee to clock in/out for them.

Accurate time reporting is a federal and state wage and hour requirement, and employees are required to comply. Failing to enter time into the timekeeping system in an accurate and timely manner is unacceptable job performance.

Non-exempt employees are not permitted to work overtime or unscheduled time without prior authorization from their supervisor. This includes clocking in early, clocking out late, or working through the scheduled lunch period.

OVERTIME

The Company complies with all applicable federal and state laws with regard to payment of overtime work. Generally, non-exempt employees are paid overtime at the rate of one and one-half times the regular rate of pay for all hours worked over 40 in a workweek unless applicable state laws dictate otherwise.

Employees are required to work overtime when assigned. Any overtime worked must be authorized by a supervisor or manager, in advance. Working unauthorized overtime or the refusal or unavailability to work overtime is not acceptable work performance, and is subject to discipline, including but not limited to termination.

PAYROLL DEDUCTIONS

The Company is required by law to make certain deductions from all employees' paychecks. Such deductions include federal, state, and local taxes and court-ordered wage garnishments. Voluntary deductions might include premiums for benefits, retirement plan contributions, and disability insurance.

Exempt Employee Payroll Deductions

The Company complies with the salary basis requirements of the Fair Labor Standards Act (FLSA) and does not make improper deductions from the salaries of exempt employees. Exempt employees are those employed in a *bona fide* executive, administrative or professional capacity and who are exempt from the FLSA's overtime pay requirements.

The Company is not required to pay the full salary in the first or last week of employment; for weeks in which an exempt employee takes unpaid leave under the Family and Medical Leave Act, if applicable; or for penalties imposed in good faith for infraction of safety rules of major significance. In these circumstances, either partial day or full day deductions may be made.

PAY ADJUSTMENTS, PROMOTIONS AND DEMOTIONS

The Company is most interested in providing maximum opportunity for employee advancement within the Company, if advancement opportunities are available. Accordingly, present employees of the Company may be considered for promotions and may be preferred for promotion before any new employees are hired to fill vacancies that may arise. Of course, the Company retains sole discretion to determine the factors to be applied in any promotion decision, and the relative weight of the factors.

All pay increases are based upon merit, market factors, and the profitability of the company. There may not be an automatic annual cost of living or salary adjustment to reflect current economic conditions. Employees pay also may be adjusted downward. Salary decreases may take place when there is job restructuring, job duty changes, job transfers or adverse business economic conditions.

Demotion is a reduction in responsibility, usually accompanied by a reduction in salary. If and when a demotion occurs, employees may maintain their seniority with the Company.

PERFORMANCE EVALUATION

Employees will generally receive an appraisal of their job performance as scheduled. This evaluation may be either written or oral. Such evaluation may not occur at exactly the same time each year, but thereabout, at the discretion of the supervisor or manager.

If in this appraisal employees are given an evaluation sheet or other written document, employees will be required to sign it. An employee's signature does not necessarily indicate that the employee agrees with all the comments, but merely that the employee has been given the opportunity to examine the evaluation and fully discuss the contents of it with their supervisor or manager. The completed and signed evaluation form will be placed in the employee's personnel file and the employee will receive a copy of the performance evaluation.

In addition to any formal review, informal counseling sessions may be conducted from time to time.

WORK ASSIGNMENTS

In addition to specific duties that come with an individual's job responsibilities, each job also includes "other duties as assigned." From time to time, employees may be required to perform duties or tasks of a fellow employee who is absent or for a position that is temporarily vacant. Employees will be compensated at their regular rate of pay while performing other assigned duties on a temporary basis.

EXPENSE REIMBURSEMENT

This policy establishes the reimbursement procedures for travel, entertainment, and other business expenses ("business expenses") incurred during the conduct of Company business. It is Company policy to reimburse employees for ordinary, necessary, and reasonable expenses when directly related to the transaction of Company business, and with prior approval. Directly related means:

- There is the expectation of deriving some current or future benefit for the Company
- The employee is actively engaged in a business meeting or activity necessary to the performance of the employee's job duties, or
- There is a clear business purpose for entertainment

Employees are expected to exercise prudent business judgment regarding expenses covered by this policy. Reimbursement for expenses that are outside the scope of this policy requires the prior written approval of management.

The following expenses may be reimbursable under this policy:

- Lodging
- Meals
- Travel expenses including airfare, reasonable airline luggage fees, train fare, bus, taxi, and related tips
- Car rental
- Personal mileage
- Tolls

- Conference and convention fees
- Parking
- Other reasonable and necessary business expenses, not specifically excluded by this policy, and with prior approval

Employees who utilize personal cars for business travel may be reimbursed at the per mile rate or by a monthly car allowance established by the Company.

The following expenses are not reimbursable under this policy:

- Child care costs
- Airline club dues
- Barber/hairstylist
- Toiletries
- Traffic fines
- In-flight movies or refreshments
- Hotel room movies and other forms of personal entertainment
- Luggage, briefcases
- Alcohol
- First class airfare
- Clothing, other than required uniforms or personal protective equipment

No policy can anticipate every situation that might give rise to legitimate business expenses. Reasonable and necessary expenses not listed above may be incurred. When prior approval is required, managers are responsible for using professional judgment to determine if an unlisted expense is reimbursable under this policy.

Credit Cards

The Company-issued credit cards are to be used for purchases on behalf of the Company and for any travel expenses incurred while traveling on Company business only. At no time may an employee who is in possession of a Company issued credit card use this card for purchases intended for personal use.

All expense reporting guidelines are to be followed for submitting expenses charged to the Company issued credit card.

Documentation

Requests for reimbursement of business expenses and requests for payment of credit card bills must be submitted on the appropriate form.

Original receipts are required for all expenses. Requests for exceptions to this policy should document extenuating circumstances and be approved by management.

The Company complies with IRS regulations which require that all business expenses be substantiated with adequate records. This substantiation must include information relating to:

- The amount of the expenditure
- The time and place of the expenditure
- The business purpose of the expenditure
- The names and the business relationships of individuals for whom the expenditures were made

Requests for reimbursement lacking this information will not be processed and will be returned to the originator.

Approvals

Expense reimbursement forms, together with required documentation, must be submitted to the employee's immediate supervisor for review and signature approval. In the absence of the immediate supervisor, approval from the next higher level of supervision is required. Upper management may approve expense reimbursement if the above mentioned supervisory approvals cannot be obtained due to the supervisors' absences.

Once the expense reimbursement has been approved by the employee's manger it should be submitted for processing no later than 30 days after the expenses occurred. Supervisors approving expense reports are responsible to ensure the following:

- Expenses reported are proper and reimbursable under this policy
- The expense report has been filled out accurately and with the required documentation
- The expenses are reasonable and necessary

BENEFITS

GENERAL

Employee benefits are administered as follows unless otherwise stated in the employee's employment agreement.

HOLIDAYS

Regular full-time employees are entitled to the following paid holidays observed by the Company:

- New Year's Day
- President's Day
- Memorial Day
- Independence Day
- Labor Day
- Thanksgiving
- Friday after Thanksgiving
- Christmas Day

Other days or parts of days may be designated as holidays with or without pay. No holiday pay will be paid to an employee who is on an unpaid status, on any leave or absent due to workers' compensation

SICK LEAVE

All employees will receive 40 hours of paid sick leave on their date of hire and will be eligible to use Sick Leave hours on the 91st day of employment. Unused sick leave will be forfeit at the end of each benefit year, immediately prior to employees being provided with 40 new hours of sick leave. The benefit year for Sick Leave is marked by the employee date of hire unless otherwise specified in an employment agreement.

When sick leave is used, it will be paid at the employee's regular rate of pay. Sick leave can be used in increments of one hour or more. A written accounting of each employee's available sick leave will be distributed on at least a quarterly basis.

Yearly usage is capped at 40 hours. Unused sick leave will not be paid out at the end of employment. Employees rehired within one year will be credited with their previously paid sick leave balance.

Employees may use sick time for the following:

- An employee's mental or physical illness, injury or health condition, need for medical diagnosis, care or treatment of a mental or physical illness, injury or health condition or need for preventive health care

- For the care of a family member with a mental or physical illness, injury or health condition, need for medical diagnosis, care or treatment of a mental or physical illness, injury or health condition or need for preventive health care
- To seek legal or medical services if an employee is a victim of domestic violence, sexual assault, or stalking
- For any purpose allowed under state family leave laws
- In case of public health emergency

Employees are required to make a good faith effort to provide advanced notice of the leave if the need for leave is foreseeable. A note from a medical provider may be required if more than 24 consecutive working hours are taken as sick leave, or if the employee does not have a health care provider, a signed written statement documenting the need for leave.

VACATION

Vacations provide a break beneficial to both the Company and the employee. Therefore, employees are encouraged to take vacations annually. Eligible employees include:

- Full-time exempt
- Full-time non-exempt

Employees will accrue vacation according to the following schedule unless otherwise stated in an employment agreement:

Years of Employment	Accrual Rate per Pay Period	Annual Vacation Accrued
Years 1 – 3	1.67 hours	Five days (40 hours)
Years 4 – 10	3.34 hours	Ten days (80 hours)
Years 11+	5 hours	Fifteen days (120 hours)

New employees will begin accruing vacation immediately upon hire. Accrued vacation time may not be used until the completion of 90 days of employment. Unused vacation at the end of the benefit year may accrue up to 1.5x an employee's annual accrual rate. Upon reaching that limit an employee would have to use time before beginning to accrue again.

Vacations need to be scheduled with the appropriate manager with sufficient notice so as not disrupt the workplace. Requests for vacation time during particularly busy times must be coordinated with a supervisor at least four weeks in advance. Every effort should be made towards considering anticipated workload when planning vacations. If an employee requests vacation but does not have the sufficient amount of vacation available, the employee may be granted the use of unpaid time off.

HEALTH AND WELFARE BENEFITS

The Company complies with all applicable federal and state laws with regard to benefits administration. All regular employees scheduled and generally working at least 40 hours a week are entitled to health insurance and other company-sponsored health benefits, as may be in effect from time to time. The Company reserves the right to change or terminate health plans or other benefits at any time.

New qualifying employees will be eligible for coverage on the first day of the next month following 60 calendar days from date of hire.

CONTINUATION OF BENEFITS

Employees may be allowed to continue their health insurance benefits, at the employee's expense, for up to 18 months after experiencing a qualifying event as outlined below. Longer periods of coverage may be available dependent upon the qualifying event.

Employees

- Voluntary or involuntary termination of employment for reasons other than gross misconduct
- Reduction in numbers of hours worked

Spouses

- Loss of coverage by the employee because of one of the qualifying events listed above
- Covered employee becomes eligible for Medicare
- Divorce or legal separation of the covered employee
- Death of the covered employee

Dependent Children

- Loss of coverage because of any of the qualifying events listed for spouses
- Loss of status as a dependent child under the plan rules

UNPAID FAMILY & MEDICAL LEAVE

EVIO employees are eligible to take unpaid leave as per the terms of The Family and Medical Leave Act of 1993 and applicable state laws. Consult the Human Resources department for details and notify your immediate supervisor if you choose to take this type of unpaid leave of absence.

TEMPORARY DISABILITY LEAVE

The Company recognizes that a temporary disability may preclude an employee's attendance at work. In such cases, the Company does not have a predetermined specified period of time in which this unpaid leave is granted. Rather, the Company will attempt to reasonably accommodate the needs of the employee as well as the needs of the Company. If a leave is granted, any extensions will be subject to the same considerations.

Employees that request a temporary disability leave must do so in writing. That request should be accompanied by a doctor's statement identifying the temporary disability, the date and the estimated date of return and, where appropriate, diagnosis and prognosis. Should the employee's expected return date change, the employee should notify the Company as soon as possible. Prior to returning to employment with the Company, employees will be required to submit written medical certification of their ability to work, including any restrictions. Upon returning to work, if employees qualify, they will be reinstated to their former position or one that is substantially the same, depending upon the availability of any position at that time.

Any unused accrued sick leave must be used prior to the effective date of the temporary disability leave. The Company may require the use of other accrued paid time off in accordance with state and federal medical leave regulations.

MILITARY LEAVE

If employees are on an extended military leave of absence, they are entitled to be restored to their previously held position or similar position, if available, without loss of any rights, privileges or benefits provided the employee meets the requirements specified in the Uniformed Services Employment and Reemployment Rights Act (USERRA).

An employee who is a member of the reserve corps of the armed forces of the United States or of the National Guard or the Naval Militia will be granted temporary leave of absence without pay while engaged in military duty as required by state employment law. A letter from the employee's commanding officer is required to establish the dates of duty.

MILITARY FAMILY LEAVE

An employee who works an average of 20 or more hours per week whose spouse is a member of the Armed Forces, National Guard or Reserves that has been deployed during a period of military conflict is eligible to receive unpaid days off according to applicable state laws when their spouse is on leave from military deployment.

An employee must provide their supervisor with a notice of intention to take leave within five business days of receiving official notice that their spouse will be on leave from deployment. Employees taking family military leave must also provide the Company with written documentation certifying their spouse will be on leave from deployment.

JURY SERVICE LEAVE

If an employee is summoned to report for jury duty, they will be granted a leave of absence according to applicable state laws when the employee notifies and submits a copy of the original summons for jury duty to their supervisor or manager. The Company reserves the right to request that they seek to be excused from or request postponement of jury service if the absence from work would create a hardship to the Company.

Employees are to report to work on any day, or portion thereof that is not actually spent in the performance of jury service. For each week of jury duty, a certificate of jury service shall be certified by the Court and filed with the Company no later than Wednesday of the following week.

Any fees received for jury duty, including travel fees, are to be retained by the employee. The leave is unpaid. Exempt employees will be paid in accordance with the Fair Labor Standards Act (FLSA) requirements.

VICTIMS OF DOMESTIC VIOLENCE, SEXUAL ASSAULT & STALKING LEAVE

The Company will not discriminate against employees who are victims of domestic violence, sexual assault, or stalking for taking time off from work to obtain or attempt to obtain any relief, including but not limited to a temporary restraining order, restraining order, or other injunctive relief to help ensure the health, safety, or welfare of a victim or their child.

The Company will also not discriminate against an employee who is a victim of domestic violence, sexual assault, or stalking for taking time off from work to seek medical attention for injuries caused by such domestic violence or sexual assault, to obtain services from a domestic violence, sexual assault, or stalking program, to obtain psychological counseling related to the domestic violence, sexual assault, or stalking or to participate in actions to increase safety from future domestic violence, sexual assault, or stalking including temporary or permanent relocation. The Company will make reasonable accommodations for victims of domestic violence, sexual assault, or stalking, including but not limited to the implementation of safety measures.

Affected employees must give the Company reasonable notice that they are required to be absent for a purpose stated above, except for unscheduled or emergency court appearances or other emergency circumstances. In such a case, the Company will take no action against affected employees if, within a reasonable time after the appearance, they provide the Company with documentary evidence that their absence was required for any of the above reasons.

This leave is unpaid. However, affected employees may use any unused sick or vacation time towards the leave. Exempt employees may be provided time off with pay when necessary to comply with state and federal wage and hour laws.

PERSONAL LEAVE OF ABSENCE

Once an employee has been employed as a full-time regular employee of the Company for 90 days they may request a personal leave of absence without pay. The employee must submit their request in writing and state the date the leave is to begin, the date of return to work, and the reasons for the leave. The employee will receive either written approval or denial of the request. If approved, employees must use their leave of absence for the approved reason or purpose. Sick leave, vacation time, seniority, and other

benefits are not earned during an unpaid leave of absence. Any paid holidays that fall within the leave of absence are not paid. If an employee fails to return to work on the scheduled date of return, the employee will be considered to have abandoned their position and voluntarily terminated their employment.

BEREAVEMENT LEAVE

A full-time employee of the Company may request a leave of absence with pay for a maximum of 3 working day(s) upon the death of a member of their immediate family. Members of the immediate family are defined as parents, spouse/domestic partner, child, or sibling. Bereavement Leave for non-immediate family members may be requested for a maximum of 1 working day. Proof of death may be required.

CONTINUING EDUCATION

It is the policy of the Company to support employees who wish to broaden their knowledge, increase their capabilities, and enhance their qualifications for career growth in fields related to the Company's interest.

All educational assistance must have prior approval from the department heads and the Human Resource Administrator.

SEMINARS AND CONFERENCES

Employees may be sent on occasion to outside seminars or conferences as deemed appropriate by their department head and the Human Resource Administrator. Such courses must be directly related to the employee's present job and must have prior approval by The Human Resource Administrator. The Company will reimburse approved expenditures for pre-approved outside seminars and conferences.

HEALTH, SAFETY, AND SECURITY

SAFETY

The Company is committed to providing a clean, safe, and healthful work environment for its employees. Maintaining a safe work environment, however, requires the continuous cooperation of all employees. All employees must comply with all occupational safety and health standards and regulations established by the Occupational Safety and Health Act, state and local regulations, and all company Standard Operating Procedures. In addition, all employees are expected to obey safety rules and exercise caution and common sense in all work activities.

As a cannabis testing lab, there are several inherent risks to safety. The laboratory uses dangerous materials and chemicals in its day to day work. And we store both cannabis and cash which may be a target for intrusion and theft.

Employees must immediately report any unsafe conditions to their supervisor. Employees who violate safety standards, cause hazardous or dangerous situations, or fail to report or, where appropriate, remedy such situations may be subject to disciplinary action, up to and including termination of employment.

In the case of an accident that results in injury, regardless of how seemingly insignificant the injury may appear, employees must notify their supervisor.

Questions regarding this policy should be directed to your supervisor

LABORATORY SAFETY

The Laboratory Director is responsible for ensuring the safe operation of the lab. Adhere to all company Standard Operating Procedures while working in the lab and promptly report any lab safety concerns to the Laboratory Director.

- Do not attempt to operate, alter, or move equipment or instruments unless properly trained and authorized to do so. Always follow the operating instructions, and work with instruments only under the guidance of the Laboratory Director
- Properly store and secure all chemicals, solvents, and marijuana products in accordance with standard operating procedures and the company's security plan.
- Be aware of the location and use of safety equipment including the eyewash station, fire extinguishers, and first aid equipment

OFFICE SAFETY

Always be mindful of safety, even when working in an office environment.

- Shut desk drawers and laterals (file drawers) when not in use.

- Do not overload wall-mounted shelving.
- Keep aisles clear of filing stools, boxes, wastebaskets, or electrical cords.
- Use one file drawer at a time and close the drawer when finished.
- Lift safely. Bend your knees and lift with your legs, not your back. Ask for assistance if the load is too heavy or too bulky.
- Know the location of fire extinguishers in your area and how to use them.
- Be mindful when engaging in day to day activities that could cause injury such as use of ladders, use of office equipment such as paper cutters.
- Be mindful of the ergonomics of your office to avoid injury and chronic conditions such as eye strain or carpal tunnel syndrome.
- Put items in proper storage locations to eliminate tripping hazards, items falling from shelves, etc.
- Immediately report all accidents or injuries, no matter how slight, to your supervisor.

SECURITY

All employees must be trained in the company's Security procedures. The information provided below are just a portion of the requirements specified in the security procedures.

FACILITY ACCESS

Select employees will be issued a key to gain access to the office and laboratory. Employees who are issued keys are responsible for their safekeeping. All lost or stolen keys must be reported to your supervisor as soon as possible. Employees are not authorized to duplicate keys or share combinations or security codes with any person who is not authorized to have the keys or information. Individuals who have keys or codes shall be identified in the corporate Key Log.

Upon separation from the company, and at any other time upon company's request, all keys must be returned to your supervisor.

PEOPLE ALLOWED IN THE FACILITY:

- Where required by law, employees must check the identification of every person that enters the facility and wishes to access restricted areas.
- Regulatory, law enforcement, or other government personnel will be admitted to the facility only they can produce photo identification that identifies their affiliation with the regulatory or law enforcement agency.

Employees must immediately notify the COO or CEO if any government or regulatory personnel attempt to enter or request permission to enter the facility.

Minors are not allowed anywhere in facilities where prohibited by law, including licensed laboratory facilities.

Refer to Standard Operating Procedures and the appropriate governing state regulatory agencies' rules for more details.

ALARM SYSTEM:

Employees must be aware of the location of every "panic button" located in the facility
In the event of any emergency or threat to employees or customers, such as robbery, employee must utilize the "panic buttons" to alert the security company, and if possible must dial 911.

CLOSING PROCEDURES:

The last employee, or a designated employee, who leaves the office at the end of the business day assumes the responsibility to ensure that: all doors are securely locked; any alarm system is armed; thermostats are set on appropriate evening and/or weekend setting; and all appliances and lights are turned off with the exception of the lights normally left on for security purposes. All usable marijuana must be secured in a safe or locked refrigerator when the facility is not open for business. Any cash, checks, or money orders must be secured in a locked cash drawer or safe. Employees must ensure that any security alarm and video surveillance systems are armed/operational before leaving the facility.

REMOVAL OF PRODUCT:

No usable marijuana and/or immature plant(s) may be moved to or from the facility at any time, unless transferred to authorized licensees in accordance with the company's standard operating procedures and documented as required in the Cannabis Tracking System.

VIDEO SURVEILLANCE

Employee and customer safety and security are of utmost importance to the Company. Further, it is a requirement of our state licensing that our facilities are secure.

As such, the company must install video cameras throughout the laboratories, including in the entry area, and in all areas where marijuana may be present in the facility, in accordance with requirements from the governing state agencies. Video surveillance is designed to minimize theft and to identify persons engaged in theft or criminal activity while on Company property. It is also required by the state regulatory agencies to monitor all portions of the licensed facility where marijuana may be present.

In accordance with federal law, our video surveillance does not contain an audio component. Additionally, video will never be recorded in private areas such as restrooms.

Recorded video will be stored in a secure location and accessed only by authorized personnel. Details of the video surveillance system is also documented in the Security Plan. Questions regarding this policy should be directed to your immediate supervisor.

Video recordings shall be archived in accordance with each the appropriate state regulatory agency specific rules, and will be made accessible to state authorities upon request. Disabling or tampering with the video surveillance system will lead to disciplinary action up to and including termination and, as necessary, reporting to state authorities.

NON-SMOKING

Smoking is not permitted in any Company buildings, facilities, work sites, or vehicles. Employees wishing to smoke should do so during their break times, outside Company buildings in designated areas, and in accordance with local ordinances.

DRUG AND ALCOHOL

The use of, sale, possession, transfer, manufacture, distribution, dispensation, purchase, or reporting to work or working under the apparent influence or effects of non-medically prescribed controlled substances or alcohol on company property and/or while working for the Company will not be tolerated.

Any employee deemed to be impaired while on the job will be asked to go home immediately. The penalty for violating the Company's stand on alcohol and drugs may result in termination.

The Company reserves the right to search employees' personal belongings and work area, as well as request medical verification through drug testing, where there is reasonable suspicion that an employee may be violating the substance abuse policy. Any suspected illegal drugs confiscated will be turned over to the appropriate law enforcement agency.

Any employee taking medication should consult a medical professional to determine whether the drug may affect their personal safety or ability to perform the essential functions of the job and should advise their supervisor or manager of any job limitations. Upon notification of job limitations, the Company will make reasonable efforts to accommodate the limitation.

The moderate use of alcohol at Company approved meetings, with business meals, travel, and entertainment or in an appropriate social setting is not prohibited by this policy.

REASONABLE ACCOMMODATIONS

It is the policy of the Company to comply with all the relevant and applicable provisions of the federal Americans with Disabilities Act (ADA) and Pregnancy Discrimination Act (PDA), as well as state and local laws concerning the hiring and employment of individuals with temporary and ongoing disabilities. Pregnant workers may also have impairments related to their pregnancies that qualify under the ADA. The Company will not discriminate against any qualified employee or job applicant because of a person’s physical or mental disability with respect to any terms, privileges or conditions of

employment, including, but not limited to hiring, advancement, discharge, compensation and training.

Employees who become disabled should notify their supervisor or manager if the conditions of the disability impair their ability to perform the essential functions of their position. Where necessary and feasible, reasonable accommodations will be made for qualified disabled employees to perform the essential functions of the job in question, as long as the accommodation does not cause the Company undue hardship. The Company will also make reasonable accommodations for employees who have work-related limitations stemming from pregnancy, childbirth or a related medical condition. This may include temporary transfer to a less strenuous or less hazardous position, if an employee so requests upon the advice of their health care provider, as long as the accommodation does not cause the Company undue hardship.

All employees are required to comply with safety standards. Applicants who pose a direct threat to the health or safety of other individuals in the workplace, which cannot be eliminated by reasonable accommodation, will not be hired. Current employees who pose a direct threat to the health of safety of the other individuals in the workplace will be placed on appropriate leave until a decision has been made by management in regard to the employee's immediate employment situation.

INJURY AND ACCIDENT RESPONSE AND REPORTING

In the event that an employee becomes injured or witnesses an injury during working hours, they must report it immediately to the nearest available supervisor or manager. Employees are to render any assistance requested by supervisor, or manager. Questions asked by law enforcement or fire officials making an investigative report should be answered giving only factual information and avoiding speculation. Liability for personal injury or property damage should never be admitted in answering an investigatory question asked by law enforcement or fire officials.

When any accident, injury, or illness occurs while an employee is at work, regardless of the nature or severity, the employee must obtain an injury reporting form and complete and return the form to Human Resources as soon as possible. Reporting should not be allowed to delay necessary medical attention. Once the accident is reported, follow-up will be handled by Human Resources or the designated Safety Officer. The employee may not return to work without the permission of Human Resources or the Safety Officer.

In addition to compliance with safety measures imposed by federal Occupational Safety and Health Act (OSHA) and state law, the Company has an independent interest in making its facilities a safe and healthy place to work. The Company recognizes that employees may be in a position to notice dangerous conditions and practices and therefore encourages employees to report such conditions, as well as all non-functioning or hazardous equipment, to a supervisor or manager immediately. Appropriate remedial measures will be taken when possible and appropriate.

Employees will not be retaliated or discriminated against for reporting of accidents, injuries, or illnesses, filing of safety-related complaints, or requesting to see injury and illness logs.

WORKERS' COMPENSATION

The Company provides insurance for all work-related injuries or illness. The name of the Company's workers' compensation insurance carrier and other pertinent information is posted. The carrier governs all insurance benefits provided by the Company. These contracts shall not be limited, expanded or modified by any statements of Company personnel or Company documents. Any discrepancies shall be determined by reference to the insuring contracts.

WORKPLACE VIOLENCE AND SECURITY

It is the intent of the Company to provide a safe workplace for employees and to provide a comfortable and secure atmosphere for customers and others with whom the Company does business. The Company has zero tolerance for violent acts or threats of violence.

The Company expects all employees to conduct themselves in a non-threatening, non-abusive manner at all times. No direct, conditional, or veiled threat of harm to any employee or Company property will be considered acceptable behavior. Acts of violence or intimidation of others will not be tolerated. Any employee who commits, or threatens to commit a violent act against any person while on Company premises will be subject to immediate discharge.

Employees within the Company share the responsibility in identification and alleviation of threatening or violent behaviors. Any employee who is subjected to or threatened with violence, or who is aware of another individual who has been subjected to or threatened with violence, should immediately report this information to their supervisor, manager or designee. Any threat reported will be carefully investigated and employee confidentiality will be maintained to the fullest extent possible.

DRIVING SAFETY

The safety and well-being of our employees is of critical importance to the Company. We therefore each have a responsibility to not only protect ourselves when on the road but also should do our part to protect those around us. Employees that are required to drive on Company business will be expected to consistently follow all the safety procedures below.

1. All employees are expected to wear seat belts at all times while in a moving vehicle being used for Company business, whether they are the driver or a passenger.
2. Use of handheld devices, whether personal or Company-owned, while behind the wheel of a moving vehicle should be used with hands-free technology.

3. Engaging in other distracting activities including, but not limited to, eating, putting on makeup, reading, or changing radio stations or music is strongly discouraged while driving, even when in slow-moving traffic.
4. The use of alcohol, drugs, or other substances including certain over-the-counter cold or allergy medications that in any way impair driving ability is prohibited.
5. All employees are expected to follow all driving laws and safety rules, such as adherence to posted speed limits and directional signs, use of turn signals, and avoidance of confrontational or offensive behavior while driving.
6. All passengers must be approved by management in advance of travel.
7. Employees should never allow anyone to ride in any part of the vehicle not specifically intended for passenger use and/or any seat that does not include a working seat belt.
8. Employees must promptly report any accidents to local law enforcement as well as to the Company in accordance with established procedures.
9. Employees are also required to report any moving or parking violations received while driving on Company business and/or in Company vehicles.
10. Insurance must be maintained current as a term and condition of continuing employment in positions that require driving.

Employees are not to drive a personal vehicle for Company business unless authorized to do so. If the job requires an employee to operate their personal vehicle, the employee shall be required to submit proof of a current and valid state driver's license. If employees use their own vehicle, either by authorization or requirement to carry out the business of the Company, they must submit a photocopy of the cover page of their insurance policy covering that vehicle as proof of insurance.

If an employee is involved in an automobile accident while on Company business (in a personal or Company vehicle) they must report the accident to their supervisor or manager immediately. Employees should request and obtain a police report and police investigation at the scene of the accident. Employees should not admit liability or guilt and should not apologize or say they are sorry under any circumstances, even if they believe they are at fault.

INCLEMENT WEATHER

This policy establishes guidelines for Company operations during periods of extreme weather and similar emergencies. The Company will remain open in all but the most extreme circumstances. Unless an emergency closing is announced, all employees are expected to report to work. However, the Company does not advise employees to take unwarranted risks when traveling to work in the event of inclement weather or other emergencies. Each employee should exercise their best judgment with regard to road conditions and other safety concerns.

Designation of Emergency Closing

Only by the authorization of designated managers will the Company cease operations due to emergency circumstances. If severe weather conditions develop during working hours, it is at the discretion of Management to release employees. Employees will generally be expected to remain at work until the appointed closing time.

Procedures during Closings

If weather or traveling conditions delay or prevent an employee's reporting to work, their immediate supervisor should be notified as soon as possible. If possible, such notification should be made by a telephone conversation directly with the supervisor. If direct contact is not possible, leaving a detailed voicemail message or message with another employee is acceptable.

An employee who is unable to report to work may use any accrued time off or take the day off without pay.

Pay and Leave Practices

When a partial or full-day closing is authorized by Management, the following pay and paid leave practices apply:

- Non-exempt hourly employees will be sent home for partial days with the option of using paid time off for the remainder of the day. If paid time off is not available, employees will be excused from work without pay and without disciplinary action.
- Exempt employees will be expected to continue work from home if their job duties allow. The Company will pay the exempt employee's regular salary regardless, as outlined in the Exempt Employee Payroll Deductions policy.
- Exempt and non-exempt employees already scheduled to be off during emergency closings are charged such leave as was scheduled.

Other Work Options

Supervisors may approve requests for employees to temporarily work from home, if doing so allows completion of work assignments.

WORKPLACE GUIDELINES

HOURS OF WORK

Employees are expected to be at their work area, ready to work at their scheduled time. Employees will be given their individual duty hours upon hire and at the time of any change in position. If the normal duty hours are changed or if the Company changes its operating hours, employees will be given written notice to facilitate any personal planning.

OFF-THE-CLOCK WORK

Non-exempt employees must accurately record all time worked, regardless of when and where the work is performed. Off-the-clock work (engaging in work assignments or duties that are not reported as time worked) is prohibited. No member of management may request, require, or authorize non-exempt employees to perform work without compensation. This includes checking email on personal devices after work hours. Any possible violations should be reported promptly to a supervisor or member of management.

MEAL PERIODS

Employees working six or more hours in one workday are entitled to take a non-compensated meal period each workday of 30 minutes. Scheduling can be flexible and depends on the length of the workday, but should be between the 2nd and 5th hour of a seven-hour or shorter workday or the 3rd and 6th hours of a workday longer than seven hours.

Employees will be relieved of all duties during the unpaid meal period. In no case may any meal period be waived to shorten an employee's work hours or to be used in lieu of time without pay. Any employee who is scheduled to work not more than six hours in any workday may, by mutual agreement between the Company and the employee, work without a meal period.

REST PERIODS

Employees will take a ten-minute rest period for every four hours worked.

WORKPLACE PRIVACY

The company respects the personal privacy of our employees and customers. However, in an effort to safeguard company property and to ensure employee safety and security, the company may implement systems for workplace monitoring. Workplace monitoring includes but is not limited to the monitoring of: video surveillance, telephones, email, internet, keypad and alarm entries, and computers.

While on the Company's property and while using company resources, employees do not have a reasonable expectation of privacy. Employees should not use company assets for personal use.

When monitoring employee activities in the workplace, The Company will follow all applicable state and federal laws. Questions regarding this policy should be directed to your immediate supervisor.

LACTATION ACCOMMODATION

The Company provides a supportive environment to enable breastfeeding employees to express breast milk during work hours for up to one year following the birth of a child. Accommodations under this policy include a place, other than a bathroom, that is shielded from view and free from intrusion from co-workers and the public which may be used by an employee to express breast milk. Discrimination and harassment of breastfeeding mothers in any form is unacceptable and will not be tolerated.

Employees will be allowed a minimum of 30 minutes of break time for every four-hour work period for lactation breaks.

ATTENDANCE AND TARDINESS

Employee attendance is a major concern of the Company. Unsatisfactory attendance including tardiness and leaving work early is unacceptable performance. Employees will be rated in their performance appraisal in the categories of attendance and punctuality.

If an employee is ill, injured, or an unexpected emergency arises which prevents them from coming to work, the employee must notify their supervisor or manager no later than 30 minutes before the start of their scheduled work day. If an employee's supervisor, manager or designee is not available, the employee should contact a member of management. If an employee is physically unable to contact the Company, they should direct another person to make the contact on their behalf. Leaving a message with a fellow staff employee or with the answering service is not considered proper notification.

When an employee calls in absent they are to advise the Company of their expected date of return. Management reserves the right to require proof of illness, injury or accident, including a doctor's statement or notice for any temporary disability.

Repeated absences, excessive absences (excused or unexcused) or a pattern of absences are unacceptable job performance. If an employee is absent for three consecutive days and has not provided proper notification, the Company will assume that the employee has abandoned their position and may be treated as having voluntarily terminated employment with the Company.

If an employee becomes ill at work they should notify their supervisor or manager immediately. If an employee is unable to perform their job tasks they may be sent home for the remainder of the day or until able to work again.

Employees shall be at their workstation ready to begin work at the start of their scheduled work time or resumption of work duties. If employees are not prepared they will be considered tardy. Excessive tardiness, whether excused or unexcused, constitutes unacceptable work performance.

All absences are to be arranged as far in advance as possible. This includes vacations and time off for other reasons. If a doctor or dental appointment must be scheduled during the workday, it should be scheduled as early in the morning or as late in the afternoon as possible.

ATTIRE

Our policy regarding appropriate dress is based on the safety and comfort of employees while providing a professional company image that portrays competence, compliance, and safety.

Our dress code company policy outlines the company's expectations from employees regarding their appearance. The company's guidelines are not meant to unreasonably restrict the freedom of expression that is conveyed through one's attire, and appropriate, and neat, casual attire is acceptable. However, the way employees project themselves when they represent the company with clients, visitors or other external parties can have direct consequences on how it is perceived. Therefore, they should be aware that appearance is seen as an integral part of the company's culture and any inappropriateness could expose the company and damage its reputation.

The following guidelines must be always observed:

- All employees must be clean and well-groomed. Grooming preferences or dictates by religion, ethnicity etc. are not restricted but should always be well-presented
- All clothes must be appropriate for the nature of the work performed.
- Clothes that are too revealing or inappropriate for a specific situation are prohibited.
- Employees should avoid clothes with stamps that might be perceived as offensive or inappropriate.
- Technical Laboratory personnel must wear personal protective equipment as directed by the Lab Director.

As stated above, the types of clothes an employee may wear depends on the context of the employees position in the company. For example, a lab technician may wear jeans and a neat top under a lab coat. A sales director or executive of the company should dress "business casual" or better when coming into contact with potential clients, partners, particularly when outside of the office and when meeting with investors, regulators, and when attending tradeshows or seminars and regulatory hearings. The position of an employee is important as it defines whether they will be setting an

example for other staff or whether they will come in frequent contact with clients or prospects.

Returning home to change is considered a valid request from an employee's supervisor.

Any questions about appropriate dress should be made to your supervisor.

PROFESSIONAL IMAGE

The Company prides itself on professionalism, quality, and excellence. It is understandable that we wish to project that image to clients, outside companies, businesses and individuals in the community.

When you are attending Company sponsored functions such as meetings, seminars, dinners, and other recreational functions, keep in mind that you represent the Company, and speak and act accordingly.

OFFICE SPACE

Our professional image and standards of quality are reflected in our work area. It is important to project a neat, professional image, especially in areas visible by clients and in the laboratory. As an analytical test lab, it is imperative that our work areas remain clean, clutter and dust-free, and sterile where it is necessary.

Intake areas should be free of clutter and inviting for customers to interact with employees while free of distraction. Work spaces should be clear whenever not in use.

CONFIDENTIALITY

There shall be no disclosure of any confidential information or trade secrets to anyone outside the Company without the appropriate authorization. Confidential information may include internal reports, policies, procedures, and other internal business-related communications. Trade secrets may include information regarding the development of systems, processes, products, design, instruments, formulas and technology. In addition, always respect financial disclosure laws and third party intellectual property.

It is an employee's duty and responsibility to safeguard all confidential information. This includes the dissemination of information by any available means, including but not limited to telephone, fax, and email.

When any inquiry is made regarding an employee or any former employee, the inquiry must be forwarded to a supervisor or manager without comment from the employee. When any inquiry is made regarding any client, the inquiry must be forwarded to a supervisor or manager.

Confidential information shall be disclosed and/or discussed only on a "need to know" basis. Conversation of a confidential nature must never be held within earshot of the public or clients.

This policy is intended to alert employees to the need for discretion at all times and is not intended to inhibit normal business communications. In addition, nothing in this policy is intended to infringe upon employee rights under Section 7 of the National Labor Relations Act (NLRA).

HEALTH INSURANCE PORTABILITY AND ACCOUNTABILITY ACT (HIPAA)

The Company is not a covered entity as defined by HIPAA; however, we do maintain health care plans and personnel files that are subject to HIPAA requirements. Thus, the Company has made a decision that HIPAA privacy and security provisions will apply to protected health information (PHI) maintained by the company. HIPAA regulations will be followed in administrative activities undertaken by assigned personnel when they involve PHI in any of the following circumstances: health information privacy, health information security and health information electronic transmission. The Company will consider any breaches in the privacy and confidentiality of handling of PHI to be serious, and disciplinary action will be taken in accordance with our code of conduct.

CONFLICT OF INTEREST

The Company is judged by the collective and individual performance of its employees. The Company has a particular interest in preserving its reputation and the reputation of its employees for the utmost honesty and integrity. Thus, the Company holds itself and its employees to the highest standards of lawful and ethical conduct.

Employees must be very careful that their relationship with clients or vendors and other activities do not subject them or the Company to questions or undue criticism. Employees must refrain from engaging in any activity that could be in conflict with their status as a Company employee. This includes the use of an employee's position with the Company for personal profit, advantage, or entering into transactions or relationships where it may appear that an employee has a conflict of interest, are improperly benefiting from an affiliation with the Company, or are violating laws governing fiduciary relationships. Good judgment should supplement these provisions to avoid even the appearance of impropriety.

If an employee has questions about the propriety of a transaction or activity, they should seek guidance from their supervisor or manager. If necessary, employees should seek written approval before proceeding.

INSIDER TRADING

EVIO Labs is owned in majority by EVIO, Inc., a publicly traded company.

It is illegal to buy or sell securities, or invite others to buy or sell securities, based on information that has not been made public. "Made Public" means the information has not been disseminated via press release, posted to the company website, or disclosed in financial filings that are available on the SEC website.

Guidelines for ensuring you remain in compliance:

- Treat company information as confidential.
- Don't tip or trade on information that you learn at work or elsewhere.
- Do not disclose material non-public information to anyone, and especially do not disseminate information via social media.
- Do not disclose non-public information about business partners, clients, customers, and suppliers.
- Do not disclose information about expected future plans, for instance do not discuss unannounced clients, partnerships, mergers or acquisitions, plans for expansion, hiring, or departures.

In general, coordinate with company CEO prior to making any material public announcements or disclosures or trades of the Company stock.

Refer to the Insider Trading Policy for more details.

BUSINESS GIFTS

The Company wants at all times to avoid the appearance of impropriety in the acceptance of gifts from business contacts or clients. It is the policy of the Company that employees are prohibited from either directly or indirectly asking, demanding, exacting, soliciting, or seeking anything of value for themselves or for any other person or entity.

Employees are also prohibited from either directly or indirectly accepting, receiving, or agreeing to receive anything of value for themselves or for any other person or entity (other than employee paychecks from the Company) for, or in connection with any transaction or business of the Company that has a value of $50 or more. If an employee is promised, offered, or given anything of value from any customer, or prospective customer for, or in connection with any transaction or business of the Company, employees are to advise their supervisor or manager at once.

OUTSIDE ACTIVITIES

Employees may engage in personal educational activities during non-working hours, provided that such activities do not interfere with their job performance or constitute a conflict of interest. Prior to arranging outside activities employees are to notify their supervisor or manager in writing with details regarding the nature, and schedule of the activity. If the activity constitutes a conflict of interest or interferes with the employee's job, at any time, employees may be required to terminate such activity.

OUTSIDE EMPLOYMENT

At the Company, we consider your employment to be primary to any outside employment. We discourage outside or secondary employment for full time employees, as it is likely to have a negative influence on the quantity and quality of your work at the Company. Outside employment should be disclosed to your supervisor.

Unless an alternative work schedule has been approved by the company, employees will be subject to the Company's scheduling demands, regardless of any existing outside work assignments; this includes availability for overtime when necessary.

The company's property, office space, equipment, materials, trade secrets, and any other confidential information may not be used for any purposes relating to outside employment.

REPORTING IRREGULARITIES

It is the responsibility of each employee of the Company to immediately report any and all irregularities indicating actual or suspected existence of loss, fraud, embezzlement, or similar impairment of Company funds or property and suspicious persons or activity.

If an employee's actual or constructive knowledge of any irregularity exists and the employee does not report it to their supervisor or manager, that employee has engaged in unacceptable job performance.

INSPECTIONS AND SEARCHES

Any items brought to or taken off of Company premises, whether property of the employee, the Company, or a third party, are subject to inspection or search unless prohibited by state law. Desks, lockers, workstations, work areas, computers, USB drives, files, e-mails, voice mails, etc. are also subject to inspection or search, as are all other assets owned or controlled by the Company. The Company may monitor any telephone conversation employees have on Company owned or controlled equipment, premises, or property. Any inspection or search conducted by the Company or its designees may occur at any time, with or without notice.

CORPORATE COMMUNICATIONS

Effective and ongoing communication within the company is essential. As such, the Company maintains systems through which important information can be shared among employees and management.

The company uses a variety of modes of communication including internet, email, instant messaging, phone and text messages to facilitate communication and share access to documents. If inquiries are made to the employee via email, voicemail, or text, employees must respond to the communication as soon as possible, and within 2 business days.

All employees are responsible for checking internal communications on a frequent and regular basis. Employees should consult their supervisor with any questions or concerns on information disseminated.

If an employee will be out of the office, post an out of office notification as an email auto response, and update voicemail messages, that include a secondary contact or supervisors contact information for accurate follow through.

TELEPHONES

Certain employees may be issued cell phones for business use. It is permissible to use these phones for personal use after business hours. However, the phone is the property of the company, and the company reserves the right to review phone records of such phones for business purposes. The voicemail messages from all corporate phones must reflect the corporate image, and not be misconstrued as a personal phone owned by the employee. If an authorized employee prefers to use a personal cell phone for business purposes, the individual may be reimbursed for a portion of the phone bill that is related to business. Provide appropriate documentation with your expense report.

PERSONAL TELEPHONE CALLS

Every employee needs to place and receive personal phone calls on occasion during work hours. Personal calls shall be kept short and infrequent, and should never interfere with business operations. If a long personal call is necessary, take the call off premises and take appropriate time off from work to handle the call.

COMPUTERS

In the course of their employment, employees will may have access to computer hardware and software provided by the Company. Both the hardware and the software are the property of the Company and are provided to ensure that the business of the Company is conducted as efficiently as possible. They are to be used for Company business only and are not for personal use. All such hardware and software, and all communications using such hardware or software -- whether in electronic form or in "hard copy" -- remain the property of the Company at all times.

NOTE: Communications using the Company computers are not private. They may be monitored, recorded or downloaded for review. Employees who wish to engage in private communications should not use any of the Company's hardware or software. This policy applies to all forms of computer-generated communications, including but not limited to communications by fax, modem and electronic mail.

Employees are indirectly responsible for the ongoing integrity of the Company's computer data and computer security system. Computers are purchased by and for the benefit of the Company and are the property of the Company. Access to computer files is restricted to job-related need, and access must be authorized by the appropriate supervisor.

Each employee who uses the Company computer resources assumes the responsibilities listed below:

· Only software that has been authorized and purchased by the Company should be loaded or used on any company computer.

· The Company or vendor software and software manuals should not be duplicated or reproduced in any manner. Such actions are in violation of license agreements the Company and its employees are obligated to abide by.

· The Company software is not to be altered in any manner, including but not limited to, decompiling, disassembling, cross-compiling, reverse engineering, or creating derivative works.

· Computer equipment, software or documentation should not be removed from the Company premises without written approval from a department head.

GUIDELINES FOR COMMUNICATION ON THE CORPORATE NETWORK

The Company takes pride in promoting a work environment that values excellence, professionalism, and mutual respect--qualities which extend to the use of our computing and communications resources. Our computing network, E-mail systems, and access to other external systems such as the Internet exist to support and facilitate the Company business. As such, they should be considered privileged, strategic resources.

It is each employee's responsibility to follow these corporate guidelines when using these facilities. These guidelines were designed to prevent use that may be illegal, abusive, or adversely impact the Company or its resources and at the same time show what usage is allowable.

Using Network Communications Responsibly

· Understand the level of security.

When you send sensitive material electronically, it is important to verify that all recipients are authorized to receive such information. This includes the distribution of any invoices, certificates of analysis, or employee communications.

· Maintain professionalism.

Every Company employee who uses the Company resources to access the Internet is responsible for ensuring posted messages are professional and businesslike, and have the Company's best interests in mind. Company proprietary information, confidential information, and client data must not be made available on any public medium such as an unsecured internet or social media site.

· Remember that these guidelines apply to personal expressions as well.
Your responsibility extends beyond confidential or classified information to include personal viewpoints. If postings to the Internet, or any external public bulletin or news system, are taken out of context or misinterpreted, they can have an unplanned and negative impact on the Company or be misconstrued as official corporate endorsements or statements. If unsure about appropriateness, get guidance.

If you want to post a message on the Internet or via e-mail and are unsure about its sensitivity, review the message with your manager, or contact the Human Resource Administrator.

· Restrict usage to Company employees and other authorized persons.
As with all the Company assets, use of the network is restricted to Company employees and other authorized persons and does not include family members or others.

· Engage only in reasonable use of the facility for personal communication.
Reasonable use of corporate computing facilities is permitted for personal communication. By reasonable, we mean use discretion and common sense. As an example, using E-mail to invite a few friends to a party, or occasional conversation in non-business-related topics would usually be considered reasonable.

· Do not access, communicate, or store inappropriate content.
Avoid communicating or storing material on Company resources which falls into any of the following categories:

- Any form of a "chain" letter.
- Sexually suggestive material, particularly explicit and pornographic material that violates applicable law.
- Material that expresses or promotes discriminatory attitudes towards religion, gender, age, nationality or other groups.
- Software used for "hacking or cracking" internal or external computer systems, such as viruses.
- Harassment or threats.
- Business activities unrelated to the Company.
- Messages that intentionally misrepresent the identity of the sender.
- Material that is illegal in other ways.

Mechanisms are in place for distribution of approved bulletins and notices. Best practices include:

- Get authorization before broadcasting an E-mail bulletin to all employees, and adhere to social media policy for making posts.
- Direct emails only to recipients on an as needed basis.
- Rely on chat channels or phone for communications that do not require an archive such as brief informational comments or questions.
- Do not send email that is internal to a particular department or company to individuals outside of that department or company.
- Be mindful of all the content of a thread of communication when forwarding an email.
- Be mindful that the persons reading public posts may be a customer, a regulator, a shareholder, or your supervisor.
- Be concise in communications.
- Use descriptive titles in your subject line.
- Only post a message once.
- Read all follow-ups, and do not repeat what has already been said.
- Ensure that any images posted online, in marketing materials or presentations are properly cited, and are not subject to copyright or license. Reposting images or articles from a news source, for instance, may violate terms of use and copyright law
- Cite appropriate references.

If in doubt about network usage guidelines, please contact your manager

· Disciplinary Action

Abuse of E-mail and network privileges can result in disciplinary action ranging from a warning, through suspension of network access to dismissal from the Company, depending on the circumstances of the incident. Upon receipt of a valid complaint about breach of these guidelines, the Human Resource Administrator may impose immediate access suspensions, pending further investigation through normal channels or appeal.

INTERNET POLICY

The Company provides computers and internet access, where appropriate, for business purposes. The Company allows employees to use the Company internet access for personal matters during non-work times.

Employees are prohibited from using the Company internet access or Company computers to engage in any inappropriate activity such as gambling, engaging in business activity that is unrelated to the Company, or to access material that is obscene or offensive, pornographic or containing adult themes, or include hateful or discriminatory information or language.

EXPECTATION OF PRIVACY

Desks, computers, e-mail systems, voice mail systems and other physical and electronic storage devices may be provided for the convenience of employees but remain the sole property of the Company. Accordingly, they, as well as any containers, electronic files, recordings, or any other items found within them, can be inspected by any member of Company management, at any time, with or without prior notice. Containers may include, but are not limited to, any packet, package, purse, briefcase, lunch container, computer hard drive, other computer or electronic storage devices, or recording devices. Employees should have no expectation of privacy regarding these items. Containers are subject to search whether they are locked. The Company has the right to search containers whether they are locked by a device provided by the Company or by the employee." Such a search would be rare, and initiated only if the company had reason to believe non-conforming activity such as theft of company property, breach of confidentiality, or other severe violation has occurred.

BRING YOUR OWN DEVICE

During working hours and while conducting Company business, employees must exercise the same discretion in using their personal devices as is expected for the use of Company devices. All Company policies in effect pertaining to harassment, discrimination, retaliation, proprietary information, trade secrets, confidential information, and ethics apply to the use of personal devices for and during work-related activities.

Non-exempt hourly employees may not use their device for work purposes outside of their normal work schedule without authorization in advance from management. This includes but is not limited to reading, sending and/or responding to work related e-mails, text messages, or phone calls (answering and initiating). Hourly employees will be paid in accordance with federal and state law for all hours worked.

Employees may not use their personal devices for work purposes during periods of unpaid leave without prior management authorization. The Company reserves the right to deactivate the Company's information and access on the employee's personal device during periods of unpaid leave.

SOCIAL MEDIA

The Company understands that social media can be a fun and rewarding way to share an employee's life and opinions with family, friends, and co-workers around the world. However, use of social media also presents certain risks and carries with it certain responsibilities. To assist employees in making responsible decisions about their use of social media, we have established these guidelines for appropriate use of social media. This policy applies to all employees of the Company.

<u>Post Only Appropriate and Respectful Content</u>

- Employees should maintain the confidentiality of Company trade secrets and private or confidential information. Trades secrets may include information regarding the

development of systems, processes, products, know-how and technology. Employees should not post internal reports, policies, procedures or other internal business-related confidential communications.

- Financial disclosure laws must always be respected. It is illegal to communicate or give a "tip" on inside information to others so that they may buy or sell stocks or securities.
- Only personal opinions should be expressed. Employees should never represent themselves as a spokesperson for the Company. If the Company is a subject of the content they are creating, they should be clear and open about the fact that they are an employee and make it clear that their views do not represent those of the Company, fellow employees, members, customers, suppliers or people working on behalf of the Company. If an employee does publish a blog or post online related to the work they do, or subjects associated with the Company, they should make it clear that they are not speaking on behalf of the Company. It is best to include a disclaimer such as "The postings on this site are my own and do not necessarily reflect the views of the Company."
- Do not post content that is, or may be deemed to be, disparaging to the company or to any of its employees

Media Contacts

Employees should not speak to the media on the Company's behalf without contacting Media Relations. All media inquiries should be directed to them.

For More Information

Refer also to the Social Media Policy for work-related posts.

PERSONAL PROPERTY

The Company is not liable for lost, misplaced, or stolen personal property. Employees should take all precautions necessary to safeguard their personal possessions. While the Company does not prohibit personal items in the office, desks and office areas are to be kept as neat and organized as possible. Employees should refrain from having their personal mail sent to the Company because mail may be automatically opened.

PARKING

All parking is at an employee's own risk. It is recommended that employees and visitors lock their vehicle and take other appropriate safeguards. Employees are not to park in areas reserved for visitors. It is also recommended that as appropriate, parking spots closest to entrances should be reserved for customers and visitors.

EMPLOYMENT SEPARATION

RESIGNATION

Employees are requested to provide a minimum of two weeks' written notice of their intent to resign. An employee's notice of resignation to voluntarily terminate employment with the Company should be submitted to their supervisor or manager. An exit interview may be requested.

EXIT INTERVIEW

If you terminate for any reason, you may be requested to participate in an exit interview and sign an exit interview form at time of termination. During the interview, matters of final pay and benefits will be discussed, and you will need to return any Company property you may have. We may also discuss with you the reasons for your leaving, your thoughts about your job, and the company and its policies, as appropriate.

TERMINATION

All employment with the Company is at-will employment. This means that the employee has not been hired for a specified duration, but that they can terminate their employment with the Company or the Company can terminate the employment relationship at any time, with or without cause, and with or without prior notice. An employee's at-will employment status cannot be changed by any oral modifications.

PERSONAL POSSESSIONS AND RETURN OF COMPANY PROPERTY

Any Company property issued to employees, such as computer equipment, keys, tools, parking passes or Company credit cards must be returned to the Company at the time of employment separation. Employees may be responsible for any lost or damaged items. Upon separation of employment employees are to remove their personal possessions from all Company property.

EMPLOYEE HANDBOOK ACKNOWLEDGEMENT

EVIO LABS

I acknowledge receipt of the Company's employee handbook. I agree to read the handbook and to follow the guidelines and policies set forth in the handbook and any amendments to the handbook along with the other policies and procedures of the Company.

I understand that I am not being hired for any definite period of time even though my wages are paid regularly. I further understand that I am an at-will employee and my employment can be terminated at any time, with or without cause and with or without prior notice either by the Company or myself. No promises or representations have been made to me that I can be disciplined or discharged from my employment with the Company only under certain circumstances or after certain events.

I am aware that the contents of the employee handbook are presented as a matter of information and that except for the at-will provisions, the handbook can be amended at any time. I realize that nothing in this handbook is intended to infringe upon my rights under Section 7 of the National Labor Relations Act (NLRA). Additionally, I am hereby made aware that under the Defend Trade Secrets Act I may not be held criminally or civilly liable under federal or state trade secret laws if I disclose a trade secret to a government official or attorney solely for the purpose of reporting or investigating a violation of law, or in a complaint or document filed in a lawsuit, if that filing is made under seal.

I understand and agree that the handbook is for informational purposes only and is not intended to create a contract, nor is it a contract of employment or continuing employment between myself and the Company. I also understand that neither the handbook nor any policy of the Company is a guarantee or promise of employment or continuing employment. I am aware that Company policy requires employees to be hired at-will and this policy cannot be changed by any oral modifications. My at-will employment status with the Company has been fully explained and I have been given an opportunity to ask questions regarding Company policies and my at-will employment status.

_____

Signature

_____

Printed Name

_____

Date

Quality Manual

In accordance with the NELAC Institute 2009 Standard for Laboratories and ISO 17025 Standards for Accreditation

OREGON

☐ EVIO Labs Bend
62930 OB Riley Rd, Suite 300
Bend, OR 97703

☐ EVIO Labs Eugene
1686 Pearl Street
Eugene, OR 97401

☐ EVIO Labs Medford
540 E Vilas Rd, Suite F,
Central Point, OR 97502

☐ EVIO Labs Portland
5100 SE Harney Dr #117,
Portland, OR 97206

CALIFORNIA

☐ EVIO Labs Berkeley
1200 5th Street
Berkeley, CA 94710

☐ EVIO Labs Costa Mesa
3505 Cadillac Ave., #F1
Costa Mesa, CA 92626

MASSACHUSETTS

☐ EVIO Labs Massachusetts
200 Turnpike Rd, Suite 200
Southborough, MA 01772

Concurrences:

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Revision Record

Revision No.	Date	Editor	Description of Change
0.1	2/5/2016	Jason Wilson	Add address, correct table of contents bookmarking error
0.2	5/19/2016	Jason Wilson	Change address, edit position titles of employees, add information about subcontracted analyses to OAS
1.0	6/13/2016	Jason Wilson	Kenevir Research QM revised to be EVIO Labs QM
1.1	6/24/2016	Jason Wilson	Identifying training needs added; information about calibration and CCV added; Kenevir Research and OAS logos added to cover of QM; Data integrity monitoring procedures elaborated
1.2	7/5/2016	Jason Wilson	Added pesticide analysis to list of optional analyses to include in scope of accreditation
1.3	7/10/2013	Jason Wilson	Numerous revisions as documented "wet" on obsolete copy of rev 1.2, filed in Obsolete Documents file.
1.4	7/31/2016	Jason Wilson, Lori Glauser	See accompanying Document Change request form for details of changes; modifications to language of Data Integrity sections
1.5	8/10/2016	Jason Wilson	Correction to doc ID references throughout, adjustment to lists of procedures and methods
1.6	8/13/2016	Jason Wilson	Clarified triggers for training after document revisions, correct QC parameters in Appendix B
1.7	9/16/2016	Jason Wilson	Added cannabinoid extraction to scope of testing list, corrected KRL references to EVIO references
1.8	1/3/2017	Jason Wilson	Added references to new staff and laboratory locations. Updated organizational charts and Appendix B; added Office Manager description; updated method references in Scope of Accreditation; updated holding times information; revised internal audit schedule; updated subcontract lab information
1.9	3/10/2017	Jason Wilson	Added requirements for rounding decimals to two decimal places for QC and reporting
R1.0	4/9/2017	Jason Wilson	Reidentified according to new document control scheme
1.1	9/1/2017	Jason Wilson	Added role descriptions for field technician
2.0	3/1/2018	Lori Glauser	Updated Quality Manual to recognize ISO17025 accreditation for Massachusetts and California Laboratories. Added references to ISO 17025. Updated scope of accreditation

2.1	3/1/2018	Ron Russak	Updated organization chart. Removed manual signature page for annual reviews in lieu of PowerDMS electronic signatures. Corrected Florida site address. Changed quality policy to state "Successful biennial assessments by any applicable accreditation agency."
2.2	3/27/2018	Ellen Parkin, Lori Glauser	Added additional content for initial and ongoing DOCs. Enhanced quality policy. Removed reference to amending procedures "by hand". Added MW Labs to subcontracting list. Added details regarding document control and reference to SOP. Removed job description for "Lab Technologist". Removed details regarding washing labware, ref to Washing of Labware SOP. Updated management review section
2.3	5/14/2018	Jeremy Campbell	Updates to CAPA/NCW procedures and form reference. Added section for emergency audits.

Table of Contents

Glossary

Quality system terms are defined within the sections describing the concept. General quality system term definitions can be found in the accompanying glossary in Appendix C.

Acronyms

BCC – California Bureau of Cannabis Control
DOC – Demonstration of Capability
ISO – International Standardization Organization
LIMS – Laboratory Information Management System
LOD – Limit of Detection
LOQ – Limit of Quantification
NELAC – National Environmental Laboratory Accreditation Convention
ORELAP – Oregon Environmental Laboratory Accreditation Program
QA – Quality Assurance
QAO – Quality Assurance Officer
QC – Quality Control
QM – Quality Manual
QMS – Quality Management System
RPD – Relative percentage difference
RSD – Relative standard deviation
TD – Technical Director
TNI – The NELAC Institute

Introduction (V1M2 1, 4.1)

EVIO, Inc. is a national network of natural products analytical and research and development laboratories located throughout Oregon, California, Colorado, Massachusetts and Florida. Each laboratory is either a subsidiary or licensee of EVIO, Inc.. Both the lab itself, and the parent company, are legally responsible for the activities of the lab (ISO 4.1.1).

This quality manual prescribes the quality system that shall be used by all EVIO Labs partners. While all EVIO Labs share the same quality system, the individual scope of testing for each EVIO Labs subsidiary or licensee may vary, as indicated by SOPs.

The Laboratories provide laboratory services to the regulated Cannabis industry, providing an array of analytical services for a variety of matrices including dried Cannabis inflorescence, organic solvent processed extracts and concentrates, dry sifted resins, infused lipid products such as butters and food oils, and more. The Laboratory strives to provide laboratory services to the highest standard that the Laboratory's personnel can provide by employing credentialed, competent staff, crafting an effective and efficient quality management system, utilizing appropriate analytical methods, and adhering to a strong body of scientific ethics.

Scope of Accreditation (V1M2 1.2)

It is the intention of the Laboratory to provide accredited service for the following procedures utilizing the listed methods. If a method is not specified by a client, the most appropriate available method will be chosen for the requested work. In general, the Laboratory's scope of accredited testing is indicated by the following selected analyses, and may vary by laboratory:

	Test/Procedure	Instrument	Method	Category
☐	Cannabinoid Quantitation (THCa, THC, CBDa, CBD)	HPLC-UV	SOP.T.040.020	Chemistry
☐	Cannabis Item Sampling for Regulatory Compliance w/ OAR 333-007	NA	SOP.T.20.010, ORELAP-SOP-001, ORELAP-SOP-002	Sampling
☐	QuEChERS Pesticide Preparation for Cannabis Materials	SPE w/ QuEChERS Salts	CEN EN15662 w/ SPE	Chemistry
☐	Pesticide Analysis	LC-MS/MS, GC-MS/MS	CEN EN15662 (modified)	Chemistry
☐	Cannabinoid Quantitation (THC, CBD, CBN)	GC-FID	AHP, 2013	Chemistry
☐	Yeast and Mold Colony Enumeration	3M Petrifilm™	AOAC 997.02	Microbiology
☐	Residual Solvent Quantitation	HS-GC-MS	USP 30 467	Chemistry
☐	E. coli and Coliforms Enumeration	3M Petrifilm™	AOAC 991.14 (modified)	Microbiology
☐	Salmonella Determination	3M Petrifilm™ Express System	AOAC 2014.01 (modified)	Microbiology
☐	Water Activity	Rotronic Hygropalm w/ HC2-AW probe	AOAC 32.004-32.009	Chemistry
☐	Moisture Content	Rotronic HygroLab C1 w/ HC2-AW probe	Moisture Sorption Isotherm	Chemistry
☐	Moisture Content (Loss on Drying)	Convection Oven	AOAC 934.01	Chemistry
☐	Aflatoxin Qualitative Determination (> < 20 ppb)	Vicam Aflacheck Lateral Flow System	Waters Aflacheck Procedures for Cannabis	Chemistry
☐	Cannabinoid Ratio (CBD:THC) Qualitative Determination	GC-FID	SOP.T.040.025	Chemistry
☐	Terpenoid Quantitation via FET	GC-FID, GC-MS	Restek FFAN2045-UNV	Chemistry
☐	Pesticide Quantitation	GCMSMS, LCMSMS	SOP.T.040.051, 051	Chemistry

The Laboratory will also be performing additional analytical services for clients, but these non-accredited services shall be qualified as such until they are added to our Scope of Accreditation and approved by a

NELAP certified accrediting body. Additional non-accredited services provided by the Laboratory may include any unselected services listed above.

Quality Policy (V1M2 4.1.2, 4.2.2)

It is the Laboratory's objective to produce technically defensible laboratory test results that accurately and precisely describe the sample for the purpose of reporting to the client. EVIO's top management is committed to routinely performing laboratory work in conformance to ISO 17025 and the TNI Standard (2003 and 2009) adopted by ORELAP, resulting in the continuous improvement of our laboratories and work processes. (ISO 4.2.3) EVIO's commitment to reach its objective results in the following:

- Adequately staffed and equipped laboratory facilities,
- Successful participation in proficiency testing programs operated by accredited provider,
- Successful implementation of an ISO and/or NELAP compliant quality system, as required.
- Annual internal audits with management review of laboratory objectives (ISO 4.2.2)
- Successful biennial assessments by any applicable accreditation agency,
- Timely reporting of laboratory test results to appropriate regulating authorities/clients,
- Laboratory test results that are supported by quality control data and documented laboratory testing procedures.
- Continual improvement of the quality system through program monitoring and assessment

EVIO's top management is committed to good professional practice and to the quality of its testing and calibrations in servicing its customers. Our standards of service include client satisfaction, results meeting client's quality and accuracy requirements, and achieving turnaround time commitments (ISO 4.2.2 (b)). EVIO emphasizes the importance of meeting customer, statutory, and regulatory requirements. (ISO 4.2.4) Tests and/or calibrations shall always be carried out in accordance with stated methods and customers' requirements.

The quality policy is communicated to employees during the training of new hires. It is understood, implemented, and maintained by employees at all levels. This is documented by management through the employee evaluation process, the training procedure, the internal audit process, and the document control process. The technical director shall ensure that the lab's policies and objectives for quality of testing services are documented in the Quality Manual. The technical director shall assure that the Quality Manual is communicated to, understood, and implemented by all personnel concerned. Documentation includes signed statements in each analyst's training file. (ISO 4.2.2(d))

The purpose of the laboratory's management system is to provide a framework for offering the highest standard of quality. (ISO 4.2.2 (c)) EVIO's Quality Policy is implemented through a comprehensive Quality Management System. Our performance is monitored and regularly reviewed to ensure our standards of conduct meet our high expectations of quality for our employees, customers, and stakeholders.

Quality System (V1M2, 4.1.3)

The quality system defined in the quality manual applies to all personnel who perform activities affecting quality. All employees are responsible for the quality system. The quality system applies to all activities

affecting data realization whether at permanent facilities, sites away from permanent facilities, or any mobile or temporary facilities.

Through a formal documented system of planned activities, the quality system meets the relevant requirements of ISO guide 17025, the TNI 2009 Standard for Laboratories, and the Oregon Environmental Laboratory Accreditation Program. The quality manual is maintained current and up-to-date by the Quality Manager (QAO) to reflect changes to the system. The laboratory defines it policy for each applicable standard element in the quality manual. For each element, as appropriate, the laboratory has documented procedures that further describe how the specific policy objectives and goals are met. The quality manual references these documented procedures. Where applicable, work instructions are referenced in the documented procedures and the quality manual.

Quality procedures and instructions are implemented as written. The procedures explain how the laboratory implements the standard requirements in accordance with its quality policy. They are revised, as necessary, to reflect the actual objectives, flow of tasks, and staff responsibilities. Management is committed to compliance with these standards, and continually improve the effectiveness of the management system. (ISO 4.2.2 (i))

Work instructions are maintained in the laboratory methods manual. They specify the equipment, resources and skills required, what tests and verifications will be performed to measure process and product quality, the records and written documentation used by personnel, and standards of acceptability. Work instructions are approved by the affected managerial staff and are maintained in the document control system.

Job Descriptions of Laboratory Staff (V1M2 4.1, 5.2, 4.2.6)

Technical Director (TD) / Laboratory Director- The technical director has overall responsibility for the technical operation of a laboratory location. The TD is also responsible for arranging and overseeing all support services including instrument service contracts, subcontracting sample analyses, and physical maintenance of the laboratory. The TD also interacts with departmental, interdepartmental and appointed/elected officials to participate in coordination of lab participation in departmental/ interdepartmental projects. The TD reports directly to the Chief Science Officer and President.

The technical director is responsible for providing supervision to all laboratory personnel to ensure adherence to lab documented procedures. When the technical director is not present in the lab, a deputy employee who is familiar with test procedures, the objective of the testing and the assessment of results will be appointed by the technical director to supervise. (ISO 4.1.5(j))

The technical director shall certify that personnel with appropriate educational and/or technical background perform all tests for which the lab is accredited.

Technical Director Minimum Qualifications:

The Technical Director of Chemistry shall have a bachelor's degree in the chemical, environmental, biological sciences, physical sciences or engineering or related field with at least 24 college credit hours in chemistry and at least 2 years of experience performing environmental analyses in a laboratory seeking or maintaining accreditation. A master's or doctorate can be substituted for 1 year of experience.

The Director of Microbiology shall have a bachelor's degree in microbiology, biology, chemistry, environmental sciences, physical sciences, engineering or related field with at least 16 college credit hours in microbiology and at least 2 years of experience performing microbiological analyses in a laboratory seeking or maintaining accreditation. A master's or doctorate can be substituted for 1 year of experience.

Quality Assurance Officer (QAO) - The quality assurance officer has responsibility for the quality system and its implementation. The QAO has direct access to the highest level of management at which decisions are taken on lab policy and/or resources, and to the technical director. When the QAO is not present, a deputy shall be appointed. (ISO 4.1.5)

Laboratory Technician / Operator – Lab Technicians are responsible for reading and following SOPs, performing appropriate QC checks, and informing the Technical Director when problems occur. A Technician I position includes sample preparation responsibilities but does not include interaction with analytical instrumentation or data. A Technican II position includes the responsibility to manage sample preparation workflow, initiate batch runs, and review data along with basic sample preparation responsibilities.

Laboratory Technician Qualifications:

Laboratory technicians should hold a bachelor's or graduate degree in a science related field. This requirement can be replaced with sufficient documented training and successful completion of an initial Demonstration of Capability.

Field Technician – Field technicians are responsible for reading and following SOPs, performing representative sampling of client products, recording client feedback, performing appropriate QC checks, working with any account managers and the office manager to coordinate client scheduling of field visits, and informing the Technical Director when problems occur. Field technicians are one of the primary interfaces between the lab and the client.

Field Technician Qualifications:

Field technicians should demonstrate competency in basic mathematics, statistics, and aseptic techniques. Field technicians must complete at least 8 hours of field technician training prior to performing field work solo with an additional 8 hours of refresher training completed annually.

Laboratory Office Manager – Laboratory office managers are responsible for front-of-house operations including client communications, client intake, client account and records management, and general office management. As well, laboratory office managers coordinate with laboratory technical directors and may provide data review and reporting activities as needed.

Laboratory Office Manager Qualifications:

Office Managers should hold a bachelor's degree, exhibit adequate organizational skills and have experience handling sensitive client information.

Other staff may include laboratory administrators, salespeople, accountant, marketing representatives. At EVIO, many of these corporate responsibilities are performed outside of the labs.

An organizational chart is included in **Appendix A**.

Document Control (V1M2 4.3)

All operating procedures, manuals including this quality manual, and documents are subject to document control. Distribution of controlled documents is limited to those indicated on the document distribution list. Document IDs are logged in the digital Document Control ID Log. We may use an electronic document control system, such as PowerDMS, which automates many of the document control functions, including auto-logging, notification of changes, revision control, and change control.

The purpose of the document control system is to ensure that only the most recent revisions are available to the appropriate personnel, revisions are timely, and receive the required approvals. All internal regulatory documentation, standard operating procedures, work instructions, service manuals, and product instructions are under document control. The QAO is responsible for the document control system and keeps a master list of the location of all documents and their current revision. The TD and the QAO approve all newly released documents and revised documents. Any employee can request a change to a document. Obsolete documents may be retained for legal reasons or for knowledge preservation. The QAO stores retained obsolete documents which are differentiated from any subsequent copies or revisions. All documents produced by the laboratory will contain the following information:

- effective date;
- revision number;
- document number;
- page numbers (including total number of pages);
- document title.

Controlled documents will also include an approval signature page, a revision (change record) history page, and distribution list.

All SOPs and internal controlled documents are reviewed once per year. If a document is revised during the year the revision record in the document shall demonstrate review. If a document has not been revised during the year, the review record shall be the signature of the person responsible for the document and the date of the review.

All data, including original observations, calculations and derived data, calibration records, QC records, and copies of the test reports, resulting from the analyses of samples are recorded and kept for five (5) years to allow historical reconstruction of the final result. Records, including digital records, are to be easy to retrieve, legible, protected from damage, and held secure and in confidence. Laboratory and field notebooks, instrument logbooks, standards logbooks, and records for data reduction, validation, storage,

and reporting are all controlled with document identification numbers assigned and recorded in the Document Control ID Log.

A master log for tracking all logbooks and laboratory notebooks is maintained in a central location in the laboratory. Any raw instrument data is stored in designated folders on the hard drives of their associated computers. All hardware and software associations are to be documented in the Equipment and Supply Log.

A complete list of and links to controlled documents is maintained in PowerDMS. They can be accessed by going to Reports > Documents. (ISO 4.2.5). Also refer to SOP.QA.40 *Document Control Procedures.*

Document Structure

Level 1) Quality Policy
Level 2) Quality Manual
Level 3) Policies and Procedures (SOPs)
Level 4) Instructions (Work Instructions, Checklists, Training documents)
Level 5) Records (Equipment, Supply, Quality records)

Review of Requests, Tenders and Contracts (V1M2 4.4, 4.5)

All new work is initiated by the Technical Director who delegates responsibilities for the new work according to available resources. Affected staff members meet prior to initiation of new work in order to determine if appropriate facilities and resources are available. The plan for any new testing shall be reviewed and approved by the technical director before commencing such work. If the review uncovers any potential conflicts, deficiencies, inappropriate accreditation status, and/or inability to perform the work, the laboratory shall notify the client. In cases where differences exist between the request/tender and contract they shall be resolved prior to starting work.

The review shall document that facilities and resources are organized to efficiently perform the work, including subcontracted work. The record of contract review includes pertinent discussions with the client regarding their requirements and results submitted during the contract period. For routine reviews of ongoing work a date and a signature of the laboratory official responsible for the contract is sufficient. For any new testing requirements, the designated official shall ensure that standard operating procedures and demonstration of capability to perform those tests prior to reporting results are available. The SOP(s) shall be under document control and a Demonstration of Capability statement(s) shall be on file. Copies are held in the contract review file.

Clients are notified immediately in situations where the laboratory cannot conform to the contract and if the there is a change in laboratory accreditation status.

EVIO Labs contracts work between any one of the EVIO Labs locations depending on the work required. A procedure shall be in place to ensure that samples are properly handled, documented, and transported to ensure sample and data integrity.

A subcontract laboratory is defined as a laboratory external to EVIO Labs that performs analyses for EVIO Labs. Whenever required by applicable law or regulation, subcontracted laboratories must be accredited under ORELAP. The QAO will monitor the accreditation status of subcontract laboratories as needed.

EVIO Labs currently holds subcontracting agreements with the following third-party laboratories:

Synergistic Pesticide Laboratory
2700 N Hayden Island Dr, B, Portland, OR 97217
Primary Contact: Camille Holladay
(503) 641-0500

PIXIS Labs
12423 NE Whitaker Way,
Portland, OR 97230

MW Labs
724 S. Central Ave
Medford, OR 97501

Purchasing Services and Supplies (V1M2 4.6, 5.6.4.2)

For the purposes of the laboratory quality manual, only the purchasing procedures for products that have an effect on data quality are mentioned. Any employee may file a purchase requisition using the Purchase Request Form, document ID FRM.M.20.010, to request services, supplies, or equipment. Alternatively, the online inventory management system Quartzy may be utilized to submit, review, and approve purchase requests. See the Purchasing Services and Supplies SOP for more detailed information.

All purchase requisitions will be reviewed by upper management to evaluate the urgency and practicality of requests as well as the resources required and available to accommodate the request. Once a purchase requisition is reviewed by the laboratory TD and approved by either the CSO, COO, or CEO, the service, supply, or equipment may be purchased through any approved vendors using a company credit card, cash or check. Lists of approved vendors are available within the laboratory information management system as well as the “Approved Vendors” spreadsheet found in the company Google Drive.

For supplies which affect sample analysis and/or the quality of data produced, data requisitions should be printed and filed in the Purchase Requisition and Receipt folder in the laboratory. Alternatively, data requisitions can be given to the QAO for filing.

All received purchases are to be thoroughly inspected for quality, consistency, and shipping damage. Any chemicals received shall be verified by reviewing all accompanying quality documents. If the quality of any received purchases is sufficient, the purchaser shall sign the receipt and document the receipt in the receipt log. Any physical receipts will be delivered to the Technical Director or QAO for filing. Digital receipts shall be printed and filed. Any receipts of contracted services shall include copies of any invoices or service forms describing the services provided. Any safety data sheets shall be submitted to the QAO for filing.

<u>Glassware, Chemicals, and Gases</u>

The laboratory will only purchase supplies of the highest quality needed to ensure minimal interference or contamination with a procedure. As appropriate, technicians will:

- use “Class A” volumetric glassware for the preparation and dilution of reagents, standards, and samples;
- ensure non-volumetric glassware is of an appropriate quality;
- ensure compressed gases are of known purity and guaranteed by the supplier;
- ensure chemicals are dated upon receipt, stored according to chemical properties, and discarded when shelf life is exceeded;
- ensure solvents employed in organic analyses are “analytical reagent grade” (example: HPLC grade) and stored in ventilated explosion-proof cabinets when opened;
- ensure analytical reagents or solvents are never stored with samples awaiting analysis.

Complaints and Feedback (V1M2 4.7, 4.8)

All feedback and complaints about laboratory activities affecting data quality received from clients or other parties will be documented in a customer feedback and complaint file maintained in the laboratory. The file will contain the date, name of the person receiving the complaint, a description of the complaint, source of the complaint, the resolution, and any written material accompanying the complaint. The Customer Feedback form, document ID FRM.QA.300.010, will be used for documenting complaints. Complaints concerning activities of the laboratory not associated with data quality will be documented as deemed necessary by the QAO and TD.

Laboratory personnel should not attempt to resolve complaints without informing management. The QAO investigates complaints by performing a root cause analysis, if necessary, and promptly audits all areas of activity and responsibility involved. The written results of the investigation including actions taken by the laboratory are reviewed by the TD. The results of the investigation are signed and dated by the TD and the QAO. If the investigation reveals evidence that compromises published data, clients are to be contacted and informed that their associated reports have been recalled.

Recently resolved complaints shall be reviewed at least each subsequent managerial review to determine effectiveness of resolution and any necessary preventive or corrective actions.

Control of Non-Conforming Testing (V1M2 4.9)

Specific corrective action protocols for handling out-of control QC are in each method SOP of the Methods Manual. In addition, general procedures are followed to determine when departures from quality control have occurred. Provision is made for such deviations and documentation is determined by the Corrective Action Procedure. Because of the sampling schedule and the time frame of the analysis, it is not always possible to repeat the analyses if all quality control measures are not found acceptable. Therefore, if a quality control measure is found to be out-of-control, and the data is to be reported, all samples associated with the failed quality control measure are reported with the appropriate data qualifier.

All employees have the authority to stop work on samples when any aspect of the testing and reporting process does not conform to the laboratory’s SOPs or client’s requirements. The employee who stopped work shall immediately notify the section manager, QAO, and/or TD.

The QAO and TD evaluate the significance of the non-conforming work. Corrective action is established for significant non-conforming work. If necessary, the client is notified and defective reports are recalled. The TD is responsible for authorizing the resumption of work.

If equipment servicing is ever required, the lab shall ensure the function and calibration status of the equipment prior to returning the equipment to service.

Improvement (V1M2 4.10)

The effectiveness of the laboratory's activities and quality management system shall be reviewed at least once a year for the purposes of identifying targets for improvement. An annual report shall be produced which evaluates all quality system documents and laboratory activity and indicates targets for improvement along with any associated preventative and/or corrective action forms. (ISO 4.1.6)

Corrective Action Procedure (V1M2 4.11)

Corrective action is the process of identifying, investigating, approving, implementing and validating measures to counter unacceptable departures from policies and procedures or out of control QC performance which can affect data quality. Specific corrective action procedures can be found in the Management of Non-Conforming Work and Corrective and Preventative Actions SOP (SOP.QA.100.010).

Deficiencies cited in external assessments (such as an ORELAP assessment), internal quality audits, complaints, and managerial reviews as well as process deviations that result in non-conforming work are documented. Documentation is accomplished using the Corrective Action Request Form (FRM.QA.100.010) in accordance with Management of Non-Conforming Work and Corrective and Preventative Actions (SOP.QA.100.010). The results of root cause analysis, the planned corrective actions, and the subsequent effectiveness monitoring are recorded as they are completed using the Corrective Action Request Form. The QAO maintains these records. The TD will ensure that the corrective actions are completed and closed within the agreed upon time frame. When non-conformances and departures from SOPs cause doubt about the laboratory's operations, an emergency audit shall be conducted in accordance with the internal audit procedure described in the same manner as the affected areas are promptly audited.

Method SOPs provide QC acceptance criteria and specific protocols for corrective actions. Any QC measure result that falls outside of acceptance limits requires documentation as non-conforming work and subsequent corrective action. When testing discrepancies are detected such as out-of-control QC, the analyst will follow the specific protocol for corrective action as stated in the method SOP located in electronic document control system. The discrepancy will be identified, and the sample data associated with the discrepancy will be flagged. The TD and QAO will recommend corrective actions to be initiated by the analyst and ensure implementation and documentation of the corrective action. Each corrective action log entry is reviewed, signed, and dated by the QAO and the TD. Corrective actions must be filed, and containment activities completed prior to the reporting of the affected data.

Preventive Action (V1M2 4.12)

Preventive action is the pro-active process to identify opportunities for improvement rather than a reaction to the identification of problems or complaints.

All employees have the authority to recommend preventive action. Recommendations are made to the QAO through the use of a Preventive Action Request form, document ID FRM.QA.100.010. If warranted, the QAO develops an action plan to develop, implement and monitor the action. The plan must include controls that will enable objective evaluation of its suitability. The preventive action is audited under the direction of the QAO.

Records (4.13, 5.5.5)

All records are held secure and in confidence by authorized personnel. Analytical records include all raw data, strip charts, printouts, calculations, forms, and logbooks. Quality records include reports from internal audits and management reviews as well as records of corrective and preventive actions. Technical records include original observations, derived data, and sufficient information to establish an audit trail, calibration records, staff records, and a copy of each test report or calibration certificate issued by the Laboratory. Analytical records are secured and maintained by the laboratory technical director. Quality records are secured and maintained by the QAO. Quality records are locked in a file cabinet which can only be unlocked by authorized personnel. Analytical records are locked in a designated drawer or file cabinet accessible only by the TD, QAO, and other authorized personnel. All digital records are stored on a secured password protected web server. Digital records containing sample data must be secured and locked in order to avoid the alteration of any data. All records are retained for at least five years.

Observations, data, and calculations shall be recorded at the time they are made and shall be identifiable to the specific task. If a mistake occurs during recording, the mistake will be crossed out with a single line and the correct value will be entered. The mistake should remain visible and is not to be erased or scribbled over for the purposes of history recreation and internal and external auditing.

Internal Audit, Data and Management Review (V1M2 4.14, 4.15)

Data Review

All original observations and calculations are reviewed and evaluated by the second analyst or the QAO before it is reported. The data is reviewed, per the relevant SOPs, to ensure that calculations are correct, including any manual integrations and to detect transcription errors. All results must be verified by someone other than the analyst that input the results. The results of all quality control measures are reviewed and evaluated by the TD and/or the QAO before data are reported. Errors detected in the review process are referred to the analyst for corrective action documentation and resolution. The QAO assures that all errors found in the review process are documented along with the corrective action.

Each calendar quarter, the QAO audits 5% or 5 data packages, whichever is more. The purpose of the review is to verify that all data integrity requirements are met.

Internal Quality System Audits

The QAO will arrange for an internal quality system review annually. The audit will be carried out by trained personnel who are independent (if possible) of the activity being audited. The QAO will review the requirements of the ORELAP manual and TNI standard against laboratory operations, and laboratory operations against the laboratory Quality Manual and SOPs. The results of the audits will be documented in

writing. Where audit findings cast doubt on the validity or correctness of the data, the lab will take immediate corrective action. Any corrective actions will be documented. Any Authority/client whose work was possibly adversely affected shall be notified in writing. Documented reviews are performed with respect to any evidence of inappropriate actions or vulnerabilities related to data integrity. Allegations are confidentially investigated. All investigations that result in findings of inappropriate activity are documented and shall include any disciplinary actions involved, corrective actions taken, and all appropriate notifications to clients. Documentation is maintained for five years.

Internal audits will take place on a staggered schedule to ensure all elements can be reviewed by the end of the year. The audit scheduled can be seen below.

Months	**Elements to be Audited**	**Responsible Parties**
Jan – Feb	SOPs, General Procedures, Policies	TD, Lab Manager
Mar – Apr	Client, Equipment and Supply Records	QAO, TD, Technicians
May-Jun	Technical Requirements – Chemistry	TD, Technicians
Jul-Aug	Technical Requirements – Microbiology	TD, Technicians
Sept-Oct	Document Control, Data Integrity, Data Security	Lab Manager, TD, QAO
Nov – Dec	General QMS, Quality Manual	QAO, TD

When results of an audit cast doubt on the validity of results, affected clients shall be notifying in writing within 30 business days.

Management Review (ISO 4.15)

EVIO's top management shall at least once per year conduct a review of the laboratory's management system and testing and calibration activities to ensure continuing suitability and effectiveness, and to introduce necessary changes or improvements. (4.15.1) The review will take into account the following:

- suitability of policies and procedures,
- reports from managerial and supervisory personnel**,**
- the outcome of recent internal audits,
- corrective and preventive actions,
- assessments by external bodies (ISO, ORELAP, USEPA, OSHA),
- the results of inter-laboratory comparisons or proficiency tests,
- any changes in the volume and type of work undertaken,
- customer feedback or complaints
- recommendations for improvement
- other factors such as quality control activities, changes in resources and staff, and staff training.

The findings and any corrective actions from this review will be documented. The review will be written, cover a twelve-month period, and be signed and dated by upper management. Documentation is to be maintained for five years. (ISO 4.15.2)

Emergency Audits (ISO 4.11)

In circumstances where a laboratory non-conformance report or corrective action raises the concern that the laboratory operations may not be compliant with EVIO policies and procedures or the requirements of accrediting bodies that authorize EVIO operations, an emergency internal audit shall be performed.

Emergency audits shall be performed in the same manner as scheduled internal audits, however the scope of the audit shall be determined during corrective action analysis and the results of the audit shall be referenced or otherwise included with the completed corrective action records.

Data Integrity (V1M2 4.16, 5.2.7, ISO 4.2.7)

Senior managers/department heads acknowledge their support of this program by upholding the spirit and intent of the laboratory's data integrity procedures and effectively implement the specific requirements. The Data Integrity Program consists of four parts:

Data Integrity and Ethics Training

The training shall occur for each employee required to perform laboratory testing either at the initial hiring orientation or within two weeks after assignment to laboratory functions. Annual training is required for all experienced employees. Training may be conducted in-house or externally. A record of training and a signed attestation by the trained employee shall be placed in the employee's training file.

Topics covered are documented in writing and provided to all trainees. Key topics covered are the organizational mission and its relationship to the critical need for honesty and full disclosure in all analytical reporting, how and when to report data integrity issues and record keeping. Training includes discussion regarding all data integrity procedures, data integrity training documentation, in-depth data monitoring and data integrity procedure documentation.

Trainees are required to understand that any infractions of the laboratory data integrity procedures will result in a detailed investigation that could lead to very serious consequences including immediate termination, or civil/criminal prosecution.

The initial and annual refresher data integrity training shall have a signature attendance sheet that demonstrates all staff have participated and understand their obligation related to data integrity/ethics. Specific examples of breaches of ethical behavior should be discussed including improper data manipulations, adjustments of instrument time clocks, and inappropriate changes in concentrations of standards. Data integrity training requires emphasis on the importance of proper written narration on the part of the analyst with respect to those cases where analytical data may be useful, but are in one sense or another partially deficient.

Code of Ethics Policy Agreement

Following initial data integrity training and on-going annual training, all laboratory managers, staff, and trainees shall sign a written ethics agreement, POL.300.010. Senior managers who provide the training shall also sign the agreement. The agreement states that the signers will not engage in any unethical practices with respect to data integrity nor will they tolerate improper behavior in others if it is observed or suspected. By signing, senior managers acknowledge their duties in upholding the spirit and intent of the data integrity system and in effectively implementing the specific requirements of the plan.

Monitoring

Monitoring of data production is accomplished by random data audits and ongoing communication between laboratory management and personnel. Test reports, batch analysis forms, and the data used to support them are randomly selected by the QAO for auditing to verify that all data integrity requirements are met. Each calendar quarter the QAO audits 5% or 5 data packages, whichever is more, and documents the review. The QAO shall have an in-depth understanding of typical inappropriate analytical behavior and be trained in the data integrity system. Records of these reviews are retained for five years.

When the identification of nonconformities casts doubt on the laboratory's compliance with its own policies and procedures, or compliance with the TNI standard, the lab shall ensure appropriate areas of the QMS are thoroughly investigated in a confidential manner, as soon as possible.

Confidentiality

Confidentiality is critical and maintained by use of locked filing cabinets and password protected electronic files. Anonymous data integrity violation reports may be filed online via the "Personnel Resources" section of the EVIO Labs website, www.eviolabs.com. All data integrity incidents must be documented, including investigative findings and disciplinary actions. Investigations shall occur in such a way as to assure the confidentiality of parties involved while providing a receptive environment in which employees may privately discuss ethical issues or report items of ethical concern. Resulting corrective actions are recorded. If client disclosure is determined to be necessary by senior laboratory management then such disclosures and outcomes are recorded.

All data integrity documents, SOPs, personal records and records of investigations shall be maintained for a period of five years. Documents are subject to the document control system and records are subject to the records management system as described in the laboratory's quality manual and related SOPs.

Training and Review of Personnel Qualifications (V1M2 5.2)

Laboratory management reviews an applicant's level of qualification, experience, and skills against the laboratory's job description requirements before assigning an employee to the laboratory. Each analyst has adequate experience and education to demonstrate specific knowledge of their function and a general knowledge of laboratory operations, test methods, QC procedures, and records management. The TD will keep the following personnel records:

Training File

The laboratory will maintain a training file which contains:

- A signed and dated statement from each employee that they have read, understood, and are using the current version of the laboratory Quality Manual and SOPs,
- Annually, a signed and dated 'ethics statement' from each employee that they have read, acknowledged and understood their personal ethical and legal responsibilities including the potential punishments and penalties for improper, unethical or illegal actions,
- An initial Demonstration of Capability for each employee for each accredited method,

- Documentation of any training courses, seminars, and/or workshops, and

- Documentation of each employee's continued proficiency to perform each test method by one of the following annually:

    - o acceptable performance of a blind sample (single blind to the analyst) for each accredited method, or
    - o analysis of an authentic sample that has been analyzed by another trained analyst with statistically indistinguishable results.

When an employee is under training, their work shall be under supervision until training is complete and documented in the employee training file.

Demonstration of Capability (DOC)

A DOC must be performed prior to using any test method, and any time there is a change in instrument type, personnel, or method. Initial and ongoing DOCs are documented through either the DOC Chemistry or DOC Microbiology form. Copies of these forms can be obtained online via the EVIO Labs Google Drive, or from the QAO or TD. DOCs are to be completed adhering to the method described in V1M4 1.6 and V1M5 1.6 unless ORELAP gives other requirements for a particular sample matrix and/or method. All DOCs will be filed in the employee's personnel file.
Initial and ongoing DOC requirements will be identified and defined with each analyses' procedures.

Identifying Training Needs
Ongoing training needs are identifying through several different processes and are tracked via the employee training log. Training needs are identified through ongoing corrective action monitoring, performance in initial and ongoing demonstrations of capability, and supervision of laboratory activities by management.

Management shall ensure that any required resources for training are available.

Concerning required training after document revisions, training is required for any change to a document that affects the laboratory's process of data realization. Training is not required after formatting or typographical corrections to documents.

Training materials may be found in the Workforce Development directory in the HR folder on the company Google Drive.

Laboratory Environment (V1M2 5.3)

The laboratory is equipped with sufficient power resources to operate instruments and equipment safely for all testing listed in the aforementioned Scope of Testing. Testing occurs only within the laboratory. Laboratory space is maintained and monitored to the specifications required for laboratory space and the testing performed. Electronic balances are located away from drafts and doorways in areas where their use is unaffected by vibrations. When necessary, biological sterility is measured using air density plates and recorded. Biological work areas are sterilized between uses. Neighboring test areas of incompatible activities are effectively separated. Specific work areas are defined and access is controlled. Only authorized

laboratory personnel and escorted signed-in visitors may enter the work area. Good housekeeping measures are employed to avoid the possibility of contamination. Smoking is prohibited.

All equipment and reference materials required for the accredited tests being performed are readily available in the laboratory.

Records are maintained for all equipment, reference measurement materials, and services used by the laboratory. Equipment manuals and other documentation can be found in the Equipment and Supply Documentation folder in the laboratory filing cabinet.

Reference materials traceable to national standards of measurement or to national standard reference materials are stored away from heavy use areas or major equipment that may affect the proper operation of the materials. Certificates of Traceability are any appropriate reference materials. The reference materials are used only for calibration to maintain the validity of performance.

Where applicable, test method SOPs shall specify laboratory environment requirements. The laboratory will monitor, control, and record environmental conditions as required. Temperatures for refrigerators and freezers are recorded daily when in use.

Procedures for Calibration, Verification, and Maintenance of Equipment (V1M2 5.5)

Equipment is maintained, inspected, and cleaned according to written Equipment Maintenance Procedures. Any defective item of equipment is clearly marked and taken out of service until it has been shown to perform satisfactorily.

Each item of equipment or reference material is labeled to show its calibration status.

Equipment and reference material records include:

1. Name of item of equipment or reference material
2. Manufacturer, identification, serial number
3. Date received and placed in service
4. Current location
5. Condition when received
6. Copy of manufacturer's instructions or manuals
7. Dates and results of calibrations/verifications and date of next calibration/verification
8. Details of maintenance carried out to date and planned for the future
9. History of any damage, malfunction, modification, or repair

Service of equipment is performed by trained staff or qualified service organizations. All records and certificates from service calls are retained.

Support equipment calibrations are verified annually using NIST traceable references over the range of use. Balances, ovens, refrigerators, freezers, incubators, and water baths are checked with NIST traceable references (where possible) on each day of use daily and recorded. Additional monitoring as prescribed by

the test method SOP is recorded. Mechanical volumetric dispensing devices are checked for accuracy quarterly and recorded.

Initial and continuing calibration verification requirements are detailed as appropriate in analytical method SOPs.

Traceability of Measurements (V1M2 5.6)

Verification and/or validation of equipment, such as, balances and thermometers shall be performed with National Institute of Standards and Technology (NIST) traceable standards whenever possible. Calibration certificates must indicate NIST traceability along with measurement results and the associated uncertainty and/or a statement of compliance with an identified metrological specification, such as tolerance. Reference standards, such as Class S weights and NIST traceable thermometers, are used for calibration only and shall be calibrated by an organization that can provide traceability to NIST. Volumetric glassware, if not serialized and calibrated by the manufacturer or Class A, is checked quarterly in house using a documented gravimetric technique.

Treatment of Reference Standards and Materials (V1M2 5.6.3)

The laboratory shall handle and transport all reference standards and materials in a way that protects their integrity and the safety of the staff. Reference standards and materials are stored according to manufacturer's recommendations and separately from working standards or samples.

Prepared reference standards shall be calibrated according to a defined procedure prior to use. Reference standards shall be calibrated before and after any material adjustment.

The laboratory purchases external reference samples. All reference samples are certified. The laboratory retains the manufacturer's Certificate of Analysis. Reference standards and materials are tracked from purchase, receipt, and storage through disposal. Reference standards shall, when possible, be traceable to SI Units of measurement.

All containers of standards, reagents, or materials, whether original or prepared, are labeled with an expiration date. All containers of prepared standards and reference materials have a preparation date and unique identifier. This identifier is recorded on appropriate worksheets or logbooks to ensure complete traceability throughout the preparation and analytical process.

For a current list of stocked reference standards, please see the Reference Standards Log, FRM.M.20.040, located in the Equipment and Materials QMS binder.

Upon receipt of any calibration materials, such as reference standards, any abnormalities or departures from specified condition requirements shall be documented.

Calibration/Verification of Test Procedures

Calibration and/or verification procedures are designed to ensure that the data will be of known quality and be appropriate for a given regulation or decision. Details of instrument calibration and/or test verification procedures including calibration range, standardizations, calculations and acceptance criteria are included or referenced in each test method SOP.

Sufficient raw data are retained to reconstruct the calibration used to calculate the sample result.

All calibrations are verified with a second source standard which is traceable to a national standard, when available.

Calibration standards include a concentration at or below the regulatory/decision level but above the laboratory's detection limit.

Results of samples must be within the calibration range (bracketed by standards) or the results must be flagged as having less certainty. No data associated with a calibration that is out-of-control will be reported.

The limit of quantitation LOQ is defined by the calibration range and is verified annually. The LOQ shall be verified annually for each matrix, technology, and analyte.

Sample Collection (V1M2 5.7, 5.8)

Sample Acceptance Policy

Designated employees and trained sample collectors are the only official collectors of samples. Collection is performed using approved plastic or glass containers of sufficient volume containing the necessary preservatives and chlorine neutralizing agents. Microbiology samples are collected in sterile containers. Samples that have not been properly stored during transport to the laboratory shall not be accepted unless authorized by the client in writing for informational purposes only. Containers that are found at receipt to be compromised, cracked or leaking, will not be accepted.

Each sample container will be uniquely identified using a durable (water resistant) label. For this laboratory, the laboratory ID along with the collection date will be used to mark the samples submitted. Samples that require holding at 6^{o}C and which are hand delivered to the laboratory immediately after collection must be transported on ice in order to demonstrate that the chilling process has begun. The sample acceptance policy is available to the sample collectors. If any samples do not meet any requirements of the acceptance policy, the samples are not accepted for testing, and re-sampling is requested. The client is notified.

Obtaining sample aliquots from a submitted sample as part of the test method is carried out using procedures as written in each method SOP. Appropriate techniques to obtain representative sub-samples are employed and documented in the method SOP.

The samples must be submitted to the laboratory with records of laboratory ID, client name, date and time of collection, collector's name, preservation, sample type, and remarks. Complete preservation and handling instructions are furnished to the sample collectors.

Sampling methods should follow the laboratory's sampling SOP unless other sampling procedures are required by any laws or regulations associated with the testing to be performed.

Summary of Sampling and Handling Requirements

Analysis Type	Sample Type	Minimum Sample Size Required
Cannabinoid Profile	Flower* Concentrate Alcohol Tincture Food Oil Infused Product	1g 0.5g 2 mL 3g 10g
Terpene Profile	Flower Concentrate	1g 0.5g
Pesticide Analysis	Flower* Concentrate Alcohol Tincture Food Oil Infused Product	1.5g 1g 2 mL 5g *Not Accepted*
Microbiology Analysis (Yeast and Mold, E. coli, or Salmonella)	Flower* Concentrate Alcohol Tincture Food Oil Infused Product	1g 0.5g 1 mL 2g *Not Accepted*
Residual Solvent Analysis	Concentrate Alcohol Tincture	0.5g 1mL
Water Activity and Moisture Content Determination	Flower	1g
Homogeneity	Cannabinoid Products Other than Edibles Infused Edibles	20 samples or units of similar size

Sample sizes listed are required unless otherwise required by any appropriate laws or regulations associated with the type of testing being conducted.

Sample Receipt Protocol

Upon receipt, the condition of the samples, including all items specified in the sample acceptance policy, are checked and recorded.

Sample records are linked to the sample ID and include all required information specified by the sample acceptance policy, the 2009 TNI Standard, and any applicable laws or regulations.

Samples are stored according to conditions specified in each test SOP. The laboratory has documented procedures and appropriate facilities to avoid deterioration, contamination, or damage to samples during storage, handling, preparation, and testing. Storage conditions are maintained, monitored, and recorded.

Sample Handling (V1M2 5.8)

Obtaining sample aliquots from a submitted sample as part of the test method is carried out using procedures as written in each method SOP. Appropriate techniques to obtain representative sub-samples are employed. Each sample container will be uniquely identified using a durable label or permanent marker. For this laboratory, the laboratory ID along with the collection date will be used to mark the samples submitted.

The sample acceptance policy is documented and available to the sample collectors. If any samples do not meet any requirements of the acceptance policy, the data is flagged in an unambiguous manner clearly defining the nature and substance of the variation. The sample receipt protocol is documented. The condition of the sample, including any abnormalities or departures from standard condition as prescribed in the relevant test method, is recorded.

Receipt of all samples is recorded in a permanent chronological record, order management system, or log book. The log contains the laboratory ID, date of receipt or collection, sample name, sample type, client, contact, and analyses requested. Sample records which are also available and linked to the sample ID include all required information specified by the sample acceptance policy, the TNI Standard, and any applicable laws or regulations.

Samples are stored according to conditions specified in each test SOP and the Sample Requirements table of the Sample Acceptance Policy. The laboratory has documented procedures and appropriate facilities to avoid deterioration, contamination, or damage to samples during storage, handling, preparation, and testing. Storage conditions are maintained, monitored, and recorded where necessary.

Sample Holding Times

Samples must be extracted within 7 days of receipt. Extracted liquors must be analyzed within 14 days of extraction. Samples delivered to the laboratory on the same day of sampling may be deemed acceptable if chilled or on ice. If analysis occurs within 15 minutes of sampling, preservation is not required.
Sample preservation shall be verified prior to all analyses except for volatile organic analyses (example: terpenoids, residual solvents), in which case the preservation status can be verified post analysis.

Chain of Custody Procedures

Proper traceable chain of custody shall be documented from the time the laboratory accepts a sample to the time of data realization. Anytime a sample is transferred to another entity other than the laboratory, chain of custody must be documented. Upon sample intake, chain-of-custody reflecting the transfer of material from the client to the laboratory shall be documented. Invoices produced by the order management system, Confident Cannabis, produce these signatory lines on the order invoice. Anytime the laboratory subcontracts a sample to another lab, chain-of-custody documentation shall be recorded indicating the date, time, sample IDs, and addresses associated with the transfer.

Labware

Labware is washed according to labware washing procedures appropriate for each piece of labware according to its intended use. All glassware used for volumetric measurements is Class A glassware. All glassware is made of borosilicate or other non-corrosive material, free of chips and cracks, with readable measurement marks. A volumetric equipment verification log is maintained to document daily calibration of all volumetric dispensers used.

Any washed labware intended for use in microbiological analysis is tested for possible presence of residues that may inhibit or promote growth of microorganisms by performing Inhibitory Residue Tests initially and each time the lab changes detergent formulation or washing procedures. Refer to SOP M.30.031 and M.10.030 regarding washing of labware.

Proficiency Testing

The laboratory reports its participation in an accredited proficiency testing program for each category of ELAP approval semi-annually. ORELAP PT studies may be used when available. The results are used to evaluate the ability of the laboratory to produce accurate data. Proficiency test reports along with all raw data necessary to reconstruct the analyses are retained at the laboratory.

PTs are completed no sooner than 5 months apart and no later than 7 months apart. Results of PTs shall be delivered to the accrediting body by the PT provider.

Internal Quality Control Procedures (V1M2 5.9)

The data acquired from quality control (QC) procedures are used to estimate the quality of analytical data, to determine the need for corrective action, and to interpret results after corrective actions are implemented. Each method standard operating procedure (SOP) includes detailed QC procedures and QC limits. QC limits are generated where no method limits exist. QC limits for laboratory control samples (LCS) and matrix spikes (MS) are based on the historical mean recovery plus or minus three standard deviations units. Duplicate limits for precision range from zero to 3.27 times the mean of the historical differences or relative percent differences.

(In cases where historical data is not available, interim QC limits will be used until 20 data points are available to calculate QC limits. Interim QC limits for LCS and MS will be 70% - 130% recovery. Interim QC limits for duplicates will be 20% relative percent difference.)

All quality control measures are assessed and evaluated on an on-going basis. Analytical data generated with QC samples that fall within prescribed acceptance limits indicate the test method was in control. Data generated with QC samples that fall outside QC limits indicate the test method was out of control. These data are considered suspect and the corresponding samples are reanalyzed or reported with qualifiers if reanalysis is not possible.

Method Blanks are performed at a frequency of one per batch of twenty or fewer samples. The results are used to determine batch acceptance. When blanks exceed the method SOP limits, the source of the contamination is investigated and measures are taken to correct, minimize and eliminate the problem.

Laboratory control samples are performed at a frequency of one per batch of twenty or fewer samples. The results are used to determine batch acceptance.

Matrix spikes are performed as necessary to evaluate the recovery efficiency of new sample matrices. The results are used to determine the existence of matrix effects in the spike sample. A matrix effect is indicated if the LCS data are within QC limits but the matrix spike data exceed QC limits.

Matrix duplicates are recommended to be performed at a frequency of one per twenty or fewer samples. Matrix duplicates are a measure of precision. If a duplicate result falls outside QC limits the original sample and the duplicate sample data is regarded as unreliable and a new analysis must be performed. See Appendix B for General QC Parameters and method SOPs for specific QC requirements and procedures.

Results shall be rounded to two decimal places prior to performing QC measurements.

Exceptionally Permitted Departures from Documented Policies and Procedures or From Standard Specifications

The TD has responsibility for ensuring the lab's policies and procedures are adhered by all technicians and analysts. Arrangements for known and controlled departures from documented policies and procedures are allowed. Planned departures do not require audits, however, the departure will be fully documented including the reason for the departure, the effected SOP(s), the intended results of the departure and the actual results. If the data reported to the authority or client is affected adversely, it will be notified in writing. The corrective action procedure is used for documenting this process.

Deviations from documented policies and procedures shall only occur if the deviations is documented, justified, authorized, and accepted by the client.

Reporting Analytical Results (V1M2 5.10)

The results of each test carried out by the laboratory are reported accurately, clearly, unambiguously, and objectively. Analytical results shall include this information for the client in the report of laboratory sample analysis:

1. Title;
2. Name and address of laboratory, and location where the test was carried out if different from the address of the laboratory and phone number with name of contact person for questions;
3. Unique identification of report and each page, including the total number of pages;
4. Name and address of client, where appropriate and project name, if applicable
5. Description and unambiguous identification of the tested sample including the client identification code;
6. Identification of results derived from any sample that did not meet sample acceptance requirements, such as, improper container, holding time, or temperature;
7. Date of receipt of sample, date and time of sample collection, date(s) of performance test, and time of sample preparation and/or analysis if the required holding time for either activity is less than or equal to 72 hours.
8. Identification of test method used, or unambiguous description of any non-standard method used;
9. If the laboratory collected the sample, reference to the sampling procedure;
10. Any deviations from (such as failed QC), additions to or exclusions from the test method (such as environmental conditions), and any non-standard conditions that may have affected the quality of the results, including the use and definitions of data qualifiers;
11. Measurements, examinations and derived results, supported by tables, graphs, sketches and photographs as appropriate, and any failures identified; reporting units on a wet or dry basis;
12. When required a statement of the estimated uncertainty of the result;

13. A signature and title, or an equivalent electronic identification of the person(s) accepting responsibility for the content of the of the report, and date of issue;
14. Clear indication of data provided by outside sources, such as subcontracted laboratories, clients etc; and,
15. Clear identification of numerical results with values outside of quantitation limits.

Non-accredited analyses shall be clearly qualified.

Results shall be rounded to two decimal places.

Subcontracted laboratories are identified by name and/or accreditation number on the report. A copy of the subcontractor's report shall be made available to the respective client upon request.

If a previously issued report must be amended or supplemented, the original shall remain and an amended copy shall be produced which clearly signifies on the report that the report is a supplement or amendment to another report.

If the laboratory discovers equipment used to derive results in any report casts doubt on the validity of the result it shall notify the client(s) in writing.

In the case of tests performed for internal customers, or in the case of a written agreement with the customer, results may be reported in a more simplified manner.

The laboratory shall, where clients require transmission of test results by telephone, facsimile or other electronic means, follow documented procedures that ensure that the above requirements are met and that confidentiality is preserved.

Confidentiality and Proprietary Rights

The laboratory's Client Privacy Policy is detailed in document POL.100.010. Reports of laboratory analysis will only be released to the named contact person or authorized representative on the sample submittal form, contract, or client information form, unless otherwise required by law. Proprietary information, if provided by the client, will be protected as Confidential Business Information in accordance with Title 40, Code of Federal Regulations, Part 2, Subpart B.

Government laboratory information is subject to the Freedom of Information Law. Requests for such information are directed to the Municipal Attorney for processing.

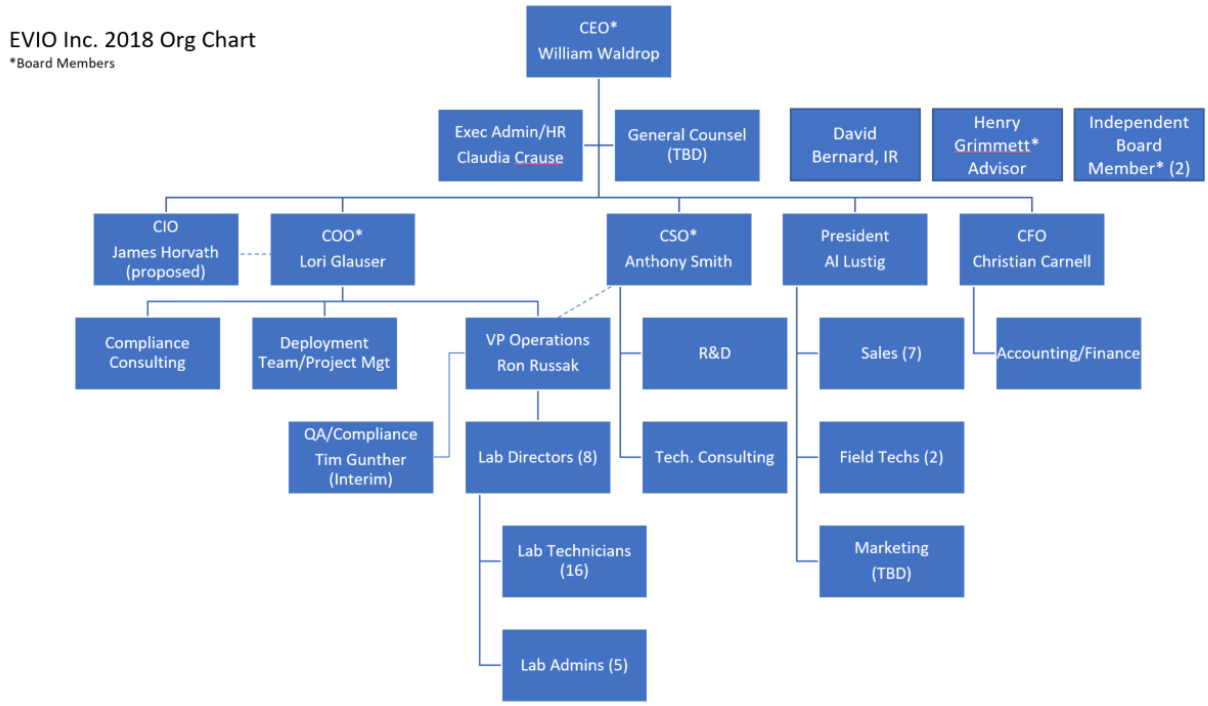
References

ISO 10725, Acceptance sampling plans and procedures for the inspection of bulk materials, 2000.

National Environmental Laboratory Accreditation Conference (NELAC), 2003 NELAC Standard, Approved June 5, 2003, Effective July 1, 2003, 324 pp (EPA/600/R-04/003).

National Environmental Laboratory Accreditation Conference (NELAC), 2009 NELAC Standard, Approved August 24, 2009, Effective July 1, 2011.

Appendix A –EVIO Labs Organizational Chart



Appendix B– General QC Parameters

QC Sample Type	Definition	Required Per Batch?	In Control Specs	OOC Procedures
Matrix Duplicate	Second preparation of an unknown sample used to measure precision	Recommended one per 20 samples per sample type	< 20% RPD	Perform dilution duplicates to check for dilution errors. Prepare a triplicate preparation to identify potential prep bench errors.
Dilution Duplicate	Second dilution of a sample liquor used to detect dilution error	No	<10% RPD	Perform matrix triplicate with larger sample size to determine heterogeneity
Method Blank	A matrix containing no target analytes in order to detect analyte contamination	**Yes**, required one per 20 samples	<LOQ for target analytes	Investigate sources of analyte contamination and take corrective actions; re-prepare the batch
Solvent Blank	Pure solvent matrix with no detectable analytes, used to detect instrument contamination	No	<LOQ for all analytes but solvent	Run solvent blank again to verify detections. Prepare fresh solvent blank from new solvent lot if solvent contamination is suspected. Consider column replacement if severe instrument contamination is suspected
Laboratory Control Sample	Batch QC consisting of a lab matrix with known concentrations of target analytes to determine accuracy.	**Yes**, required one per 20 samples	Within 2 standard deviations above and below recovery mean based on historical data (20 data points)	Investigate integrity of LCS material and prepare new LCS batch. Re-prepare sample batch
Laboratory Control Sample Duplicate	Duplicate LCS preparation used to measure precision.	No	<20% RPD	Investigate homogeneity of LCS material; prepare dilution duplicates to investigate dilution error
Matrix Spike	Client sample chosen at random is spiked with known concentrations of target analytes to measure recovery efficiency	No, but recommended	70-130% for cannabinoids Variable for pesticides and solvents	Investigate sample preparation method for ways of improving homogenization and dissolution of sample in solvent.
Matrix Spike Duplicate	Matrix spike sample prepared and spiked in duplicate to measure precision of recovery efficiency	No	<20% RPD	Perform dilution duplicates to investigate potential dilution error; investigate homogeneity of matrix spike material

Appendix C – Glossary of Quality System Terms

Accuracy	The measurement of difference between an observed value and an accepted "known" value.
Analyst	A person who participates in the execution of methods and techniques in the laboratory
Audit	An evaluation for the purposes of determining conformance
Batch	Samples that are prepared or analyzed together by the same analyst using the same procedure and materials. A preparation batch comprises 1 – 20 samples of the same matrix. An analytical batch is a set of samples to be analyzed together in one group, consisting of potentially varying matrices and numbers of samples.
Chain of Custody	Documentation of the history of possession of a sample from sampling to receipt at the laboratory.
Conformance	Affirmation that something has met a set requirement
Data Integrity	The result of processes that assure data is valid and of a known and documented quality
Dilution Duplicate	A duplicate dilution preparation of the same sample solution, typically used to check for pipetting error
Document Control	Ensuring documents are properly edited, reviewed, approved, and distributed
Holding Times	Period of time a sample may be stored prior to analysis. Samples that are analyzed after their holding times have passed must be flagged and properly qualified.
Integrity	Being uncompromised
Laboratory Control Sample	A laboratory quality sample matrix containing a known concentration of target analytes for routine monitoring of recovery among preparation batches
Matrix Duplicate	A duplicate preparation of a sample
Method	Procedures and techniques for performing an activity

National Institute of Standards and Technology (NIST)	Agency of the US Dept. of Commerce's Technology Administration that provides public and commercial groups with a system for providing accredited and traceable laboratory materials and proficiency tests (PTs)
The NELAC Institute (TNI)	A non-profit organization that works to ensure environmental data is reliable and of known and documented quality by providing standards based on international standards and community needs and desires.
National Environmental Laboratory Accreditation Program (NELAP)	Accreditation program a part of TNI
Negative Control	Methods of ensuring that a particular method, material, or environment do not influence inaccurate results.
TNI Standards	Procedures for evaluating and documenting the ability of laboratories to meet nationally defined standards established by TNI
Nonconformance	An event that does not meet a particular requirement
Quality assurance (QA)	A system of activities working to enforce, monitor, and improve the quality of laboratory performance
Quality control (QC)	A system of activities working to measure quality performance in laboratory activities
Quality control sample	A sample used to evaluate the performance of something
Quality manual	A document outlining the laboratory's quality system containing basic laboratory management policies, quality objectives, organizational structure, and more.
Quality system	A structured and documented management system for outlining, monitoring, and improving the quality of services and data produced by the laboratory.
Reference Standards	Material used to calibrate measurements, typically known concentrations of one or more analytes
Sampling	Activity related to the collection of a representative sample of some object or batch of objects

Shall	Imperative term indicating a mandatory requirement
Should	Conditional term indicating a recommendation
Standard operating procedure (SOP)	A document detailing procedures for accomplishing routine tasks
Reference method	A method issued by an organization that is accepted as competent
Traceability	The ability to trace the history of something through records
Validation	Confirmation of something through extensive evaluation and verification of conformance against established acceptance criteria

EVIOLABS

SOP Title:	Data Review and Reporting
SOP No:	SOP.T.90.010.SBH
Revision No:	0.0

Revision Record

Revision No.	Date	Editor	Description of Change
0.0	4/29/2018	Katherine Nguyen	Initial Revision

Data Review and Reporting

Contents

Data Review and Reporting

1. Purpose, Scope and Applicability

1.1. The purpose of this set of procedures is to describe the actions required for the final processes of the realization of data, namely reporting. These procedures apply to all data being reported by the lab using the EVIO Labs MA Lab Information Management System (LIMS) and the order management system, Confident Cannabis, with additional details for the use of Promium Element LIMS in conjunction with Confident Cannabis. If data is to be reported through some other means than Confident Cannabis (Element LIMS, custom PDF, etc), these procedures for data review, verification of the transcription of data, and review of draft reports shall be followed as closely as possible.

2. Procedure Summary

2.1. The process of reviewing data and issuing reports consists of several primary steps. The data is first reviewed for anomalies or out-of-control QC as mandated by each method SOP. Then the data is transcribed, the transcription accuracy is verified, and draft reports are generated. The draft reports are then checked for accuracy prior to official issuance.

3. Equipment & Materials

3.1. EVMA LIMS
3.2. Confident Cannabis order management system (if applicable)
3.3. Promium Element LIMS (if applicable)
3.4. Reliable internet connection
3.5. Access to the Confident Cannabis report generator (if applicable)
3.6. Instrument outputs of raw data or calculators containing raw and final data for each process
3.7. Preparation batch documentation (prep worksheets, notes in lab notebook, etc)
3.8. Analytical Data Review Checklist (FRM.T.90.010) and qPCR Data Review Checklist (if applicable)

4. Procedures

4.1. Documentation of Data Review
  4.1.1. Use FRM.T.90.010 to document the process of data review.
4.2. Initial Review of Data
  4.2.1. Review chromatograms or mass spectral data for anomalies or out-of-control QC according to the associated SOP. Write up corrective actions as necessary. Once all anomalies or out-of-control QC are account and resolved, proceed.
4.3. Transcribing Data
  4.3.1. Confident Cannabis
    4.3.1.1. Open the report generator in Google Drive.

4.3.1.2. Transcribe analyte result data and QC data into the appropriate cells within the appropriate worksheets within the report generator spreadsheet.

4.3.1.3. Verify that transcribed data is accurate and free from error by comparing raw data with data that has been input into the report generator. Indicate that the data is free from transcription error by indicating on the instrument data output along with the data and the reviewer's initials.

4.3.1.4. Once the transcription of data has been verified, proceed with data reporting.

4.3.2. EVMA LIMS

4.3.2.1. Enter all result information or continue to click and drag the formulae from testing tabs down in order to load results in from calculators according to SOP.T.01.001.SBH. For specific data entry suggestions, see the specific analysis SOPs.

4.3.2.2. Once all data is completely entered or loaded into the corresponding tabs, proceed with data reporting.

4.4. Peer Review Documentation

4.4.1. Someone that did not generate the data shall review all QC and sample result data as well as transcribed data to detect any errors and ensure the final quality of data prior to reporting. Once all data has been reviewed, the peer shall fill out the appropriate sections of FRM.T.90.010 and sign off on the "Reviewer" signature line.

4.5. Certificate of Analysis Generation

4.5.1. Confident Cannabis

4.5.1.1. Within the report generator, choose the appropriate signatory for each order.

4.5.1.2. Mark the samples as "ready to report" by indicating "Yes" in the drop-down menu into the appropriate cell under the "Ready to Report?" column in the spreadsheet.

4.5.1.3. Run the report generation script to generate draft reports. Click on Lab Menu > Create Reports.

4.5.1.4. Once draft reports have been generated, highlight the associated "Ready to Report?" cells green to indicate the reports are ready to be reviewed.

4.5.2. EVMA LIMS

4.5.2.1. In the manifest tab, enter the date in the "Report Sent" column.

4.5.2.2. In the "Tests Failed?" column, indicate any tests that were over limits. If no tests were over limits, put "No" in the column.

4.5.2.3. In the Template tab, enter the Lab Sample ID into X5. All results should pull from their respective tabs. Save the report as a pdf (File > Export > Pdf) and save the report in the format "EV_[Lab Sample ID]_Report_[Client Sample ID]" in the client's report folder.

4.6. Reviewing Draft Certificate of Analysis

4.6.1. Each draft report shall be reviewed for accuracy and proper formatting

4.6.2. If there is a formatting problem, communicate the problem to the person that originally generated the report. Try regenerating the report to see if the issue resolves itself. For Confident Cannabis report generation issues: contact the software administrator via email at “team@confidentcannabis.com” to report the error and have it resolved.

4.7. Issuing Certificates of Analysis to Clients

4.7.1. Once draft reports have been checked for suitability, the Analytical Batch Review Checklist is complete, and both analyst and reviewer have signed off on the data, the certificates of analysis may be officially issued to the client.

4.7.1.1. If using EVMA LIMS, reports will be sent out via email. Attach all relevant reports for the client.

4.7.2. Include a note to the client thanking them for their patronage. Include any narrations to accompany the results as necessary.

4.8. Additional Documentation

4.8.1. Additional documentation may accompany the report within the order management system (chromatograms, sample images, microbiological plate images, etc). If needed, simply navigate to the order within Confident Cannabis, select the appropriate sample, and add an attachment to the order.

4.8.2. All documentation including the Analytical Batch Review Checklist shall accompany the Preparation Batch Worksheet(s) to form a complete data package for archiving.

Quality Manual

In accordance with the NELAC Institute 2009 Standard for Laboratories and ISO 17025 Standards for Accreditation

OREGON

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☐ EVIO Labs Medford
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Central Point, OR 97502

☐ EVIO Labs Portland
5100 SE Harney Dr #117,
Portland, OR 97206

CALIFORNIA

☐ EVIO Labs Berkeley
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Concurrences:

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Revision Record

Revision No.	Date	Editor	Description of Change
0.1	2/5/2016	Jason Wilson	Add address, correct table of contents bookmarking error
0.2	5/19/2016	Jason Wilson	Change address, edit position titles of employees, add information about subcontracted analyses to OAS
1.0	6/13/2016	Jason Wilson	Kenevir Research QM revised to be EVIO Labs QM
1.1	6/24/2016	Jason Wilson	Identifying training needs added; information about calibration and CCV added; Kenevir Research and OAS logos added to cover of QM; Data integrity monitoring procedures elaborated
1.2	7/5/2016	Jason Wilson	Added pesticide analysis to list of optional analyses to include in scope of accreditation
1.3	7/10/2013	Jason Wilson	Numerous revisions as documented "wet" on obsolete copy of rev 1.2, filed in Obsolete Documents file.
1.4	7/31/2016	Jason Wilson, Lori Glauser	See accompanying Document Change request form for details of changes; modifications to language of Data Integrity sections
1.5	8/10/2016	Jason Wilson	Correction to doc ID references throughout, adjustment to lists of procedures and methods
1.6	8/13/2016	Jason Wilson	Clarified triggers for training after document revisions, correct QC parameters in Appendix B
1.7	9/16/2016	Jason Wilson	Added cannabinoid extraction to scope of testing list, corrected KRL references to EVIO references
1.8	1/3/2017	Jason Wilson	Added references to new staff and laboratory locations. Updated organizational charts and Appendix B; added Office Manager description; updated method references in Scope of Accreditation; updated holding times information; revised internal audit schedule; updated subcontract lab information
1.9	3/10/2017	Jason Wilson	Added requirements for rounding decimals to two decimal places for QC and reporting
R1.0	4/9/2017	Jason Wilson	Reidentified according to new document control scheme
1.1	9/1/2017	Jason Wilson	Added role descriptions for field technician
2.0	3/1/2018	Lori Glauser	Updated Quality Manual to recognize ISO17025 accreditation for Massachusetts and California Laboratories. Added references to ISO 17025. Updated scope of accreditation

2.1	3/1/2018	Ron Russak	Updated organization chart. Removed manual signature page for annual reviews in lieu of PowerDMS electronic signatures. Corrected Florida site address. Changed quality policy to state "Successful biennial assessments by any applicable accreditation agency."
2.2	3/27/2018	Ellen Parkin, Lori Glauser	Added additional content for initial and ongoing DOCs. Enhanced quality policy. Removed reference to amending procedures "by hand". Added MW Labs to subcontracting list. Added details regarding document control and reference to SOP. Removed job description for "Lab Technologist". Removed details regarding washing labware, ref to Washing of Labware SOP. Updated management review section
2.3	5/14/2018	Jeremy Campbell	Updates to CAPA/NCW procedures and form reference. Added section for emergency audits.

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Glossary

Quality system terms are defined within the sections describing the concept. General quality system term definitions can be found in the accompanying glossary in Appendix C.

Acronyms

BCC – California Bureau of Cannabis Control
DOC – Demonstration of Capability
ISO – International Standardization Organization
LIMS – Laboratory Information Management System
LOD – Limit of Detection
LOQ – Limit of Quantification
NELAC – National Environmental Laboratory Accreditation Convention
ORELAP – Oregon Environmental Laboratory Accreditation Program
QA – Quality Assurance
QAO – Quality Assurance Officer
QC – Quality Control
QM – Quality Manual
QMS – Quality Management System
RPD – Relative percentage difference
RSD – Relative standard deviation
TD – Technical Director
TNI – The NELAC Institute

Introduction (V1M2 1, 4.1)

EVIO, Inc. is a national network of natural products analytical and research and development laboratories located throughout Oregon, California, Colorado, Massachusetts and Florida. Each laboratory is either a subsidiary or licensee of EVIO, Inc.. Both the lab itself, and the parent company, are legally responsible for the activities of the lab (ISO 4.1.1).

This quality manual prescribes the quality system that shall be used by all EVIO Labs partners. While all EVIO Labs share the same quality system, the individual scope of testing for each EVIO Labs subsidiary or licensee may vary, as indicated by SOPs.

The Laboratories provide laboratory services to the regulated Cannabis industry, providing an array of analytical services for a variety of matrices including dried Cannabis inflorescence, organic solvent processed extracts and concentrates, dry sifted resins, infused lipid products such as butters and food oils, and more. The Laboratory strives to provide laboratory services to the highest standard that the Laboratory's personnel can provide by employing credentialed, competent staff, crafting an effective and efficient quality management system, utilizing appropriate analytical methods, and adhering to a strong body of scientific ethics.

Scope of Accreditation (V1M2 1.2)

It is the intention of the Laboratory to provide accredited service for the following procedures utilizing the listed methods. If a method is not specified by a client, the most appropriate available method will be chosen for the requested work. In general, the Laboratory's scope of accredited testing is indicated by the following selected analyses, and may vary by laboratory:

	Test/Procedure	Instrument	Method	Category
☐	Cannabinoid Quantitation (THCa, THC, CBDa, CBD)	HPLC-UV	SOP.T.040.020	Chemistry
☐	Cannabis Item Sampling for Regulatory Compliance w/ OAR 333-007	NA	SOP.T.20.010, ORELAP-SOP-001, ORELAP-SOP-002	Sampling
☐	QuEChERS Pesticide Preparation for Cannabis Materials	SPE w/ QuEChERS Salts	CEN EN15662 w/ SPE	Chemistry
☐	Pesticide Analysis	LC-MS/MS, GC-MS/MS	CEN EN15662 (modified)	Chemistry
☐	Cannabinoid Quantitation (THC, CBD, CBN)	GC-FID	AHP, 2013	Chemistry
☐	Yeast and Mold Colony Enumeration	3M Petrifilm™	AOAC 997.02	Microbiology
☐	Residual Solvent Quantitation	HS-GC-MS	USP 30 467	Chemistry
☐	E. coli and Coliforms Enumeration	3M Petrifilm™	AOAC 991.14 (modified)	Microbiology
☐	Salmonella Determination	3M Petrifilm™ Express System	AOAC 2014.01 (modified)	Microbiology
☐	Water Activity	Rotronic Hygropalm w/ HC2-AW probe	AOAC 32.004-32.009	Chemistry
☐	Moisture Content	Rotronic HygroLab C1 w/ HC2-AW probe	Moisture Sorption Isotherm	Chemistry
☐	Moisture Content (Loss on Drying)	Convection Oven	AOAC 934.01	Chemistry
☐	Aflatoxin Qualitative Determination (> < 20 ppb)	Vicam Aflacheck Lateral Flow System	Waters Aflacheck Procedures for Cannabis	Chemistry
☐	Cannabinoid Ratio (CBD:THC) Qualitative Determination	GC-FID	SOP.T.040.025	Chemistry
☐	Terpenoid Quantitation via FET	GC-FID, GC-MS	Restek FFAN2045-UNV	Chemistry
☐	Pesticide Quantitation	GCMSMS, LCMSMS	SOP.T.040.051, 051	Chemistry

The Laboratory will also be performing additional analytical services for clients, but these non-accredited services shall be qualified as such until they are added to our Scope of Accreditation and approved by a

NELAP certified accrediting body. Additional non-accredited services provided by the Laboratory may include any unselected services listed above.

Quality Policy (V1M2 4.1.2, 4.2.2)

It is the Laboratory's objective to produce technically defensible laboratory test results that accurately and precisely describe the sample for the purpose of reporting to the client. EVIO's top management is committed to routinely performing laboratory work in conformance to ISO 17025 and the TNI Standard (2003 and 2009) adopted by ORELAP, resulting in the continuous improvement of our laboratories and work processes. (ISO 4.2.3) EVIO's commitment to reach its objective results in the following:

- Adequately staffed and equipped laboratory facilities,
- Successful participation in proficiency testing programs operated by accredited provider,
- Successful implementation of an ISO and/or NELAP compliant quality system, as required.
- Annual internal audits with management review of laboratory objectives (ISO 4.2.2)
- Successful biennial assessments by any applicable accreditation agency,
- Timely reporting of laboratory test results to appropriate regulating authorities/clients,
- Laboratory test results that are supported by quality control data and documented laboratory testing procedures.
- Continual improvement of the quality system through program monitoring and assessment

EVIO's top management is committed to good professional practice and to the quality of its testing and calibrations in servicing its customers. Our standards of service include client satisfaction, results meeting client's quality and accuracy requirements, and achieving turnaround time commitments (ISO 4.2.2 (b)). EVIO emphasizes the importance of meeting customer, statutory, and regulatory requirements. (ISO 4.2.4) Tests and/or calibrations shall always be carried out in accordance with stated methods and customers' requirements.

The quality policy is communicated to employees during the training of new hires. It is understood, implemented, and maintained by employees at all levels. This is documented by management through the employee evaluation process, the training procedure, the internal audit process, and the document control process. The technical director shall ensure that the lab's policies and objectives for quality of testing services are documented in the Quality Manual. The technical director shall assure that the Quality Manual is communicated to, understood, and implemented by all personnel concerned. Documentation includes signed statements in each analyst's training file. (ISO 4.2.2(d))

The purpose of the laboratory's management system is to provide a framework for offering the highest standard of quality. (ISO 4.2.2 (c)) EVIO's Quality Policy is implemented through a comprehensive Quality Management System. Our performance is monitored and regularly reviewed to ensure our standards of conduct meet our high expectations of quality for our employees, customers, and stakeholders.

Quality System (V1M2, 4.1.3)

The quality system defined in the quality manual applies to all personnel who perform activities affecting quality. All employees are responsible for the quality system. The quality system applies to all activities

affecting data realization whether at permanent facilities, sites away from permanent facilities, or any mobile or temporary facilities.

Through a formal documented system of planned activities, the quality system meets the relevant requirements of ISO guide 17025, the TNI 2009 Standard for Laboratories, and the Oregon Environmental Laboratory Accreditation Program. The quality manual is maintained current and up-to-date by the Quality Manager (QAO) to reflect changes to the system. The laboratory defines it policy for each applicable standard element in the quality manual. For each element, as appropriate, the laboratory has documented procedures that further describe how the specific policy objectives and goals are met. The quality manual references these documented procedures. Where applicable, work instructions are referenced in the documented procedures and the quality manual.

Quality procedures and instructions are implemented as written. The procedures explain how the laboratory implements the standard requirements in accordance with its quality policy. They are revised, as necessary, to reflect the actual objectives, flow of tasks, and staff responsibilities. Management is committed to compliance with these standards, and continually improve the effectiveness of the management system. (ISO 4.2.2 (i))

Work instructions are maintained in the laboratory methods manual. They specify the equipment, resources and skills required, what tests and verifications will be performed to measure process and product quality, the records and written documentation used by personnel, and standards of acceptability. Work instructions are approved by the affected managerial staff and are maintained in the document control system.

Job Descriptions of Laboratory Staff (V1M2 4.1, 5.2, 4.2.6)

Technical Director (TD) / Laboratory Director- The technical director has overall responsibility for the technical operation of a laboratory location. The TD is also responsible for arranging and overseeing all support services including instrument service contracts, subcontracting sample analyses, and physical maintenance of the laboratory. The TD also interacts with departmental, interdepartmental and appointed/elected officials to participate in coordination of lab participation in departmental/ interdepartmental projects. The TD reports directly to the Chief Science Officer and President.

The technical director is responsible for providing supervision to all laboratory personnel to ensure adherence to lab documented procedures. When the technical director is not present in the lab, a deputy employee who is familiar with test procedures, the objective of the testing and the assessment of results will be appointed by the technical director to supervise. (ISO 4.1.5(j))

The technical director shall certify that personnel with appropriate educational and/or technical background perform all tests for which the lab is accredited.

Technical Director Minimum Qualifications:

The Technical Director of Chemistry shall have a bachelor's degree in the chemical, environmental, biological sciences, physical sciences or engineering or related field with at least 24 college credit hours in chemistry and at least 2 years of experience performing environmental analyses in a laboratory seeking or maintaining accreditation. A master's or doctorate can be substituted for 1 year of experience.

The Director of Microbiology shall have a bachelor's degree in microbiology, biology, chemistry, environmental sciences, physical sciences, engineering or related field with at least 16 college credit hours in microbiology and at least 2 years of experience performing microbiological analyses in a laboratory seeking or maintaining accreditation. A master's or doctorate can be substituted for 1 year of experience.

Quality Assurance Officer (QAO) - The quality assurance officer has responsibility for the quality system and its implementation. The QAO has direct access to the highest level of management at which decisions are taken on lab policy and/or resources, and to the technical director. When the QAO is not present, a deputy shall be appointed. (ISO 4.1.5)

Laboratory Technician / Operator – Lab Technicians are responsible for reading and following SOPs, performing appropriate QC checks, and informing the Technical Director when problems occur. A Technician I position includes sample preparation responsibilities but does not include interaction with analytical instrumentation or data. A Technican II position includes the responsibility to manage sample preparation workflow, initiate batch runs, and review data along with basic sample preparation responsibilities.

Laboratory Technician Qualifications:

Laboratory technicians should hold a bachelor's or graduate degree in a science related field. This requirement can be replaced with sufficient documented training and successful completion of an initial Demonstration of Capability.

Field Technician – Field technicians are responsible for reading and following SOPs, performing representative sampling of client products, recording client feedback, performing appropriate QC checks, working with any account managers and the office manager to coordinate client scheduling of field visits, and informing the Technical Director when problems occur. Field technicians are one of the primary interfaces between the lab and the client.

Field Technician Qualifications:

Field technicians should demonstrate competency in basic mathematics, statistics, and aseptic techniques. Field technicians must complete at least 8 hours of field technician training prior to performing field work solo with an additional 8 hours of refresher training completed annually.

Laboratory Office Manager – Laboratory office managers are responsible for front-of-house operations including client communications, client intake, client account and records management, and general office management. As well, laboratory office managers coordinate with laboratory technical directors and may provide data review and reporting activities as needed.

Laboratory Office Manager Qualifications:

Office Managers should hold a bachelor's degree, exhibit adequate organizational skills and have experience handling sensitive client information.

Other staff may include laboratory administrators, salespeople, accountant, marketing representatives. At EVIO, many of these corporate responsibilities are performed outside of the labs.

An organizational chart is included in **Appendix A**.

Document Control (V1M2 4.3)

All operating procedures, manuals including this quality manual, and documents are subject to document control. Distribution of controlled documents is limited to those indicated on the document distribution list. Document IDs are logged in the digital Document Control ID Log. We may use an electronic document control system, such as PowerDMS, which automates many of the document control functions, including auto-logging, notification of changes, revision control, and change control.

The purpose of the document control system is to ensure that only the most recent revisions are available to the appropriate personnel, revisions are timely, and receive the required approvals. All internal regulatory documentation, standard operating procedures, work instructions, service manuals, and product instructions are under document control. The QAO is responsible for the document control system and keeps a master list of the location of all documents and their current revision. The TD and the QAO approve all newly released documents and revised documents. Any employee can request a change to a document. Obsolete documents may be retained for legal reasons or for knowledge preservation. The QAO stores retained obsolete documents which are differentiated from any subsequent copies or revisions. All documents produced by the laboratory will contain the following information:

- effective date;
- revision number;
- document number;
- page numbers (including total number of pages);
- document title.

Controlled documents will also include an approval signature page, a revision (change record) history page, and distribution list.

All SOPs and internal controlled documents are reviewed once per year. If a document is revised during the year the revision record in the document shall demonstrate review. If a document has not been revised during the year, the review record shall be the signature of the person responsible for the document and the date of the review.

All data, including original observations, calculations and derived data, calibration records, QC records, and copies of the test reports, resulting from the analyses of samples are recorded and kept for five (5) years to allow historical reconstruction of the final result. Records, including digital records, are to be easy to retrieve, legible, protected from damage, and held secure and in confidence. Laboratory and field notebooks, instrument logbooks, standards logbooks, and records for data reduction, validation, storage,

and reporting are all controlled with document identification numbers assigned and recorded in the Document Control ID Log.

A master log for tracking all logbooks and laboratory notebooks is maintained in a central location in the laboratory. Any raw instrument data is stored in designated folders on the hard drives of their associated computers. All hardware and software associations are to be documented in the Equipment and Supply Log.

A complete list of and links to controlled documents is maintained in PowerDMS. They can be accessed by going to Reports > Documents. (ISO 4.2.5). Also refer to SOP.QA.40 *Document Control Procedures.*

Document Structure

Level 1) Quality Policy
Level 2) Quality Manual
Level 3) Policies and Procedures (SOPs)
Level 4) Instructions (Work Instructions, Checklists, Training documents)
Level 5) Records (Equipment, Supply, Quality records)

Review of Requests, Tenders and Contracts (V1M2 4.4, 4.5)

All new work is initiated by the Technical Director who delegates responsibilities for the new work according to available resources. Affected staff members meet prior to initiation of new work in order to determine if appropriate facilities and resources are available. The plan for any new testing shall be reviewed and approved by the technical director before commencing such work. If the review uncovers any potential conflicts, deficiencies, inappropriate accreditation status, and/or inability to perform the work, the laboratory shall notify the client. In cases where differences exist between the request/tender and contract they shall be resolved prior to starting work.

The review shall document that facilities and resources are organized to efficiently perform the work, including subcontracted work. The record of contract review includes pertinent discussions with the client regarding their requirements and results submitted during the contract period. For routine reviews of ongoing work a date and a signature of the laboratory official responsible for the contract is sufficient. For any new testing requirements, the designated official shall ensure that standard operating procedures and demonstration of capability to perform those tests prior to reporting results are available. The SOP(s) shall be under document control and a Demonstration of Capability statement(s) shall be on file. Copies are held in the contract review file.

Clients are notified immediately in situations where the laboratory cannot conform to the contract and if the there is a change in laboratory accreditation status.

EVIO Labs contracts work between any one of the EVIO Labs locations depending on the work required. A procedure shall be in place to ensure that samples are properly handled, documented, and transported to ensure sample and data integrity.

A subcontract laboratory is defined as a laboratory external to EVIO Labs that performs analyses for EVIO Labs. Whenever required by applicable law or regulation, subcontracted laboratories must be accredited under ORELAP. The QAO will monitor the accreditation status of subcontract laboratories as needed.

EVIO Labs currently holds subcontracting agreements with the following third-party laboratories:

Synergistic Pesticide Laboratory
2700 N Hayden Island Dr, B, Portland, OR 97217
Primary Contact: Camille Holladay
(503) 641-0500

PIXIS Labs
12423 NE Whitaker Way,
Portland, OR 97230

MW Labs
724 S. Central Ave
Medford, OR 97501

Purchasing Services and Supplies (V1M2 4.6, 5.6.4.2)

For the purposes of the laboratory quality manual, only the purchasing procedures for products that have an effect on data quality are mentioned. Any employee may file a purchase requisition using the Purchase Request Form, document ID FRM.M.20.010, to request services, supplies, or equipment. Alternatively, the online inventory management system Quartzy may be utilized to submit, review, and approve purchase requests. See the Purchasing Services and Supplies SOP for more detailed information.

All purchase requisitions will be reviewed by upper management to evaluate the urgency and practicality of requests as well as the resources required and available to accommodate the request. Once a purchase requisition is reviewed by the laboratory TD and approved by either the CSO, COO, or CEO, the service, supply, or equipment may be purchased through any approved vendors using a company credit card, cash or check. Lists of approved vendors are available within the laboratory information management system as well as the “Approved Vendors” spreadsheet found in the company Google Drive.

For supplies which affect sample analysis and/or the quality of data produced, data requisitions should be printed and filed in the Purchase Requisition and Receipt folder in the laboratory. Alternatively, data requisitions can be given to the QAO for filing.

All received purchases are to be thoroughly inspected for quality, consistency, and shipping damage. Any chemicals received shall be verified by reviewing all accompanying quality documents. If the quality of any received purchases is sufficient, the purchaser shall sign the receipt and document the receipt in the receipt log. Any physical receipts will be delivered to the Technical Director or QAO for filing. Digital receipts shall be printed and filed. Any receipts of contracted services shall include copies of any invoices or service forms describing the services provided. Any safety data sheets shall be submitted to the QAO for filing.

<u>Glassware, Chemicals, and Gases</u>

The laboratory will only purchase supplies of the highest quality needed to ensure minimal interference or contamination with a procedure. As appropriate, technicians will:

- use “Class A” volumetric glassware for the preparation and dilution of reagents, standards, and samples;
- ensure non-volumetric glassware is of an appropriate quality;
- ensure compressed gases are of known purity and guaranteed by the supplier;
- ensure chemicals are dated upon receipt, stored according to chemical properties, and discarded when shelf life is exceeded;
- ensure solvents employed in organic analyses are “analytical reagent grade” (example: HPLC grade) and stored in ventilated explosion-proof cabinets when opened;
- ensure analytical reagents or solvents are never stored with samples awaiting analysis.

Complaints and Feedback (V1M2 4.7, 4.8)

All feedback and complaints about laboratory activities affecting data quality received from clients or other parties will be documented in a customer feedback and complaint file maintained in the laboratory. The file will contain the date, name of the person receiving the complaint, a description of the complaint, source of the complaint, the resolution, and any written material accompanying the complaint. The Customer Feedback form, document ID FRM.QA.300.010, will be used for documenting complaints. Complaints concerning activities of the laboratory not associated with data quality will be documented as deemed necessary by the QAO and TD.

Laboratory personnel should not attempt to resolve complaints without informing management. The QAO investigates complaints by performing a root cause analysis, if necessary, and promptly audits all areas of activity and responsibility involved. The written results of the investigation including actions taken by the laboratory are reviewed by the TD. The results of the investigation are signed and dated by the TD and the QAO. If the investigation reveals evidence that compromises published data, clients are to be contacted and informed that their associated reports have been recalled.

Recently resolved complaints shall be reviewed at least each subsequent managerial review to determine effectiveness of resolution and any necessary preventive or corrective actions.

Control of Non-Conforming Testing (V1M2 4.9)

Specific corrective action protocols for handling out-of control QC are in each method SOP of the Methods Manual. In addition, general procedures are followed to determine when departures from quality control have occurred. Provision is made for such deviations and documentation is determined by the Corrective Action Procedure. Because of the sampling schedule and the time frame of the analysis, it is not always possible to repeat the analyses if all quality control measures are not found acceptable. Therefore, if a quality control measure is found to be out-of-control, and the data is to be reported, all samples associated with the failed quality control measure are reported with the appropriate data qualifier.

All employees have the authority to stop work on samples when any aspect of the testing and reporting process does not conform to the laboratory’s SOPs or client’s requirements. The employee who stopped work shall immediately notify the section manager, QAO, and/or TD.

The QAO and TD evaluate the significance of the non-conforming work. Corrective action is established for significant non-conforming work. If necessary, the client is notified and defective reports are recalled. The TD is responsible for authorizing the resumption of work.

If equipment servicing is ever required, the lab shall ensure the function and calibration status of the equipment prior to returning the equipment to service.

Improvement (V1M2 4.10)

The effectiveness of the laboratory's activities and quality management system shall be reviewed at least once a year for the purposes of identifying targets for improvement. An annual report shall be produced which evaluates all quality system documents and laboratory activity and indicates targets for improvement along with any associated preventative and/or corrective action forms. (ISO 4.1.6)

Corrective Action Procedure (V1M2 4.11)

Corrective action is the process of identifying, investigating, approving, implementing and validating measures to counter unacceptable departures from policies and procedures or out of control QC performance which can affect data quality. Specific corrective action procedures can be found in the Management of Non-Conforming Work and Corrective and Preventative Actions SOP (SOP.QA.100.010).

Deficiencies cited in external assessments (such as an ORELAP assessment), internal quality audits, complaints, and managerial reviews as well as process deviations that result in non-conforming work are documented. Documentation is accomplished using the Corrective Action Request Form (FRM.QA.100.010) in accordance with Management of Non-Conforming Work and Corrective and Preventative Actions (SOP.QA.100.010). The results of root cause analysis, the planned corrective actions, and the subsequent effectiveness monitoring are recorded as they are completed using the Corrective Action Request Form. The QAO maintains these records. The TD will ensure that the corrective actions are completed and closed within the agreed upon time frame. When non-conformances and departures from SOPs cause doubt about the laboratory's operations, an emergency audit shall be conducted in accordance with the internal audit procedure described in the same manner as the affected areas are promptly audited.

Method SOPs provide QC acceptance criteria and specific protocols for corrective actions. Any QC measure result that falls outside of acceptance limits requires documentation as non-conforming work and subsequent corrective action. When testing discrepancies are detected such as out-of-control QC, the analyst will follow the specific protocol for corrective action as stated in the method SOP located in electronic document control system. The discrepancy will be identified, and the sample data associated with the discrepancy will be flagged. The TD and QAO will recommend corrective actions to be initiated by the analyst and ensure implementation and documentation of the corrective action. Each corrective action log entry is reviewed, signed, and dated by the QAO and the TD. Corrective actions must be filed, and containment activities completed prior to the reporting of the affected data.

Preventive Action (V1M2 4.12)

Preventive action is the pro-active process to identify opportunities for improvement rather than a reaction to the identification of problems or complaints.

All employees have the authority to recommend preventive action. Recommendations are made to the QAO through the use of a Preventive Action Request form, document ID FRM.QA.100.010. If warranted, the QAO develops an action plan to develop, implement and monitor the action. The plan must include controls that will enable objective evaluation of its suitability. The preventive action is audited under the direction of the QAO.

Records (4.13, 5.5.5)

All records are held secure and in confidence by authorized personnel. Analytical records include all raw data, strip charts, printouts, calculations, forms, and logbooks. Quality records include reports from internal audits and management reviews as well as records of corrective and preventive actions. Technical records include original observations, derived data, and sufficient information to establish an audit trail, calibration records, staff records, and a copy of each test report or calibration certificate issued by the Laboratory. Analytical records are secured and maintained by the laboratory technical director. Quality records are secured and maintained by the QAO. Quality records are locked in a file cabinet which can only be unlocked by authorized personnel. Analytical records are locked in a designated drawer or file cabinet accessible only by the TD, QAO, and other authorized personnel. All digital records are stored on a secured password protected web server. Digital records containing sample data must be secured and locked in order to avoid the alteration of any data. All records are retained for at least five years.

Observations, data, and calculations shall be recorded at the time they are made and shall be identifiable to the specific task. If a mistake occurs during recording, the mistake will be crossed out with a single line and the correct value will be entered. The mistake should remain visible and is not to be erased or scribbled over for the purposes of history recreation and internal and external auditing.

Internal Audit, Data and Management Review (V1M2 4.14, 4.15)

Data Review

All original observations and calculations are reviewed and evaluated by the second analyst or the QAO before it is reported. The data is reviewed, per the relevant SOPs, to ensure that calculations are correct, including any manual integrations and to detect transcription errors. All results must be verified by someone other than the analyst that input the results. The results of all quality control measures are reviewed and evaluated by the TD and/or the QAO before data are reported. Errors detected in the review process are referred to the analyst for corrective action documentation and resolution. The QAO assures that all errors found in the review process are documented along with the corrective action.

Each calendar quarter, the QAO audits 5% or 5 data packages, whichever is more. The purpose of the review is to verify that all data integrity requirements are met.

Internal Quality System Audits

The QAO will arrange for an internal quality system review annually. The audit will be carried out by trained personnel who are independent (if possible) of the activity being audited. The QAO will review the requirements of the ORELAP manual and TNI standard against laboratory operations, and laboratory operations against the laboratory Quality Manual and SOPs. The results of the audits will be documented in

writing. Where audit findings cast doubt on the validity or correctness of the data, the lab will take immediate corrective action. Any corrective actions will be documented. Any Authority/client whose work was possibly adversely affected shall be notified in writing. Documented reviews are performed with respect to any evidence of inappropriate actions or vulnerabilities related to data integrity. Allegations are confidentially investigated. All investigations that result in findings of inappropriate activity are documented and shall include any disciplinary actions involved, corrective actions taken, and all appropriate notifications to clients. Documentation is maintained for five years.

Internal audits will take place on a staggered schedule to ensure all elements can be reviewed by the end of the year. The audit scheduled can be seen below.

Months	**Elements to be Audited**	**Responsible Parties**
Jan – Feb	SOPs, General Procedures, Policies	TD, Lab Manager
Mar – Apr	Client, Equipment and Supply Records	QAO, TD, Technicians
May-Jun	Technical Requirements – Chemistry	TD, Technicians
Jul-Aug	Technical Requirements – Microbiology	TD, Technicians
Sept-Oct	Document Control, Data Integrity, Data Security	Lab Manager, TD, QAO
Nov – Dec	General QMS, Quality Manual	QAO, TD

When results of an audit cast doubt on the validity of results, affected clients shall be notifying in writing within 30 business days.

Management Review (ISO 4.15)

EVIO's top management shall at least once per year conduct a review of the laboratory's management system and testing and calibration activities to ensure continuing suitability and effectiveness, and to introduce necessary changes or improvements. (4.15.1) The review will take into account the following:

- suitability of policies and procedures,
- reports from managerial and supervisory personnel**,**
- the outcome of recent internal audits,
- corrective and preventive actions,
- assessments by external bodies (ISO, ORELAP, USEPA, OSHA),
- the results of inter-laboratory comparisons or proficiency tests,
- any changes in the volume and type of work undertaken,
- customer feedback or complaints
- recommendations for improvement
- other factors such as quality control activities, changes in resources and staff, and staff training.

The findings and any corrective actions from this review will be documented. The review will be written, cover a twelve-month period, and be signed and dated by upper management. Documentation is to be maintained for five years. (ISO 4.15.2)

Emergency Audits (ISO 4.11)

In circumstances where a laboratory non-conformance report or corrective action raises the concern that the laboratory operations may not be compliant with EVIO policies and procedures or the requirements of accrediting bodies that authorize EVIO operations, an emergency internal audit shall be performed.

Emergency audits shall be performed in the same manner as scheduled internal audits, however the scope of the audit shall be determined during corrective action analysis and the results of the audit shall be referenced or otherwise included with the completed corrective action records.

Data Integrity (V1M2 4.16, 5.2.7, ISO 4.2.7)

Senior managers/department heads acknowledge their support of this program by upholding the spirit and intent of the laboratory's data integrity procedures and effectively implement the specific requirements. The Data Integrity Program consists of four parts:

Data Integrity and Ethics Training

The training shall occur for each employee required to perform laboratory testing either at the initial hiring orientation or within two weeks after assignment to laboratory functions. Annual training is required for all experienced employees. Training may be conducted in-house or externally. A record of training and a signed attestation by the trained employee shall be placed in the employee's training file.

Topics covered are documented in writing and provided to all trainees. Key topics covered are the organizational mission and its relationship to the critical need for honesty and full disclosure in all analytical reporting, how and when to report data integrity issues and record keeping. Training includes discussion regarding all data integrity procedures, data integrity training documentation, in-depth data monitoring and data integrity procedure documentation.

Trainees are required to understand that any infractions of the laboratory data integrity procedures will result in a detailed investigation that could lead to very serious consequences including immediate termination, or civil/criminal prosecution.

The initial and annual refresher data integrity training shall have a signature attendance sheet that demonstrates all staff have participated and understand their obligation related to data integrity/ethics. Specific examples of breaches of ethical behavior should be discussed including improper data manipulations, adjustments of instrument time clocks, and inappropriate changes in concentrations of standards. Data integrity training requires emphasis on the importance of proper written narration on the part of the analyst with respect to those cases where analytical data may be useful, but are in one sense or another partially deficient.

Code of Ethics Policy Agreement

Following initial data integrity training and on-going annual training, all laboratory managers, staff, and trainees shall sign a written ethics agreement, POL.300.010. Senior managers who provide the training shall also sign the agreement. The agreement states that the signers will not engage in any unethical practices with respect to data integrity nor will they tolerate improper behavior in others if it is observed or suspected. By signing, senior managers acknowledge their duties in upholding the spirit and intent of the data integrity system and in effectively implementing the specific requirements of the plan.

Monitoring

Monitoring of data production is accomplished by random data audits and ongoing communication between laboratory management and personnel. Test reports, batch analysis forms, and the data used to support them are randomly selected by the QAO for auditing to verify that all data integrity requirements are met. Each calendar quarter the QAO audits 5% or 5 data packages, whichever is more, and documents the review. The QAO shall have an in-depth understanding of typical inappropriate analytical behavior and be trained in the data integrity system. Records of these reviews are retained for five years.

When the identification of nonconformities casts doubt on the laboratory's compliance with its own policies and procedures, or compliance with the TNI standard, the lab shall ensure appropriate areas of the QMS are thoroughly investigated in a confidential manner, as soon as possible.

Confidentiality

Confidentiality is critical and maintained by use of locked filing cabinets and password protected electronic files. Anonymous data integrity violation reports may be filed online via the "Personnel Resources" section of the EVIO Labs website, www.eviolabs.com. All data integrity incidents must be documented, including investigative findings and disciplinary actions. Investigations shall occur in such a way as to assure the confidentiality of parties involved while providing a receptive environment in which employees may privately discuss ethical issues or report items of ethical concern. Resulting corrective actions are recorded. If client disclosure is determined to be necessary by senior laboratory management then such disclosures and outcomes are recorded.

All data integrity documents, SOPs, personal records and records of investigations shall be maintained for a period of five years. Documents are subject to the document control system and records are subject to the records management system as described in the laboratory's quality manual and related SOPs.

Training and Review of Personnel Qualifications (V1M2 5.2)

Laboratory management reviews an applicant's level of qualification, experience, and skills against the laboratory's job description requirements before assigning an employee to the laboratory. Each analyst has adequate experience and education to demonstrate specific knowledge of their function and a general knowledge of laboratory operations, test methods, QC procedures, and records management. The TD will keep the following personnel records:

Training File

The laboratory will maintain a training file which contains:

- A signed and dated statement from each employee that they have read, understood, and are using the current version of the laboratory Quality Manual and SOPs,
- Annually, a signed and dated 'ethics statement' from each employee that they have read, acknowledged and understood their personal ethical and legal responsibilities including the potential punishments and penalties for improper, unethical or illegal actions,
- An initial Demonstration of Capability for each employee for each accredited method,

- Documentation of any training courses, seminars, and/or workshops, and

- Documentation of each employee's continued proficiency to perform each test method by one of the following annually:

    - o acceptable performance of a blind sample (single blind to the analyst) for each accredited method, or
    - o analysis of an authentic sample that has been analyzed by another trained analyst with statistically indistinguishable results.

When an employee is under training, their work shall be under supervision until training is complete and documented in the employee training file.

Demonstration of Capability (DOC)

A DOC must be performed prior to using any test method, and any time there is a change in instrument type, personnel, or method. Initial and ongoing DOCs are documented through either the DOC Chemistry or DOC Microbiology form. Copies of these forms can be obtained online via the EVIO Labs Google Drive, or from the QAO or TD. DOCs are to be completed adhering to the method described in V1M4 1.6 and V1M5 1.6 unless ORELAP gives other requirements for a particular sample matrix and/or method. All DOCs will be filed in the employee's personnel file.
Initial and ongoing DOC requirements will be identified and defined with each analyses' procedures.

Identifying Training Needs
Ongoing training needs are identifying through several different processes and are tracked via the employee training log. Training needs are identified through ongoing corrective action monitoring, performance in initial and ongoing demonstrations of capability, and supervision of laboratory activities by management.

Management shall ensure that any required resources for training are available.

Concerning required training after document revisions, training is required for any change to a document that affects the laboratory's process of data realization. Training is not required after formatting or typographical corrections to documents.

Training materials may be found in the Workforce Development directory in the HR folder on the company Google Drive.

Laboratory Environment (V1M2 5.3)

The laboratory is equipped with sufficient power resources to operate instruments and equipment safely for all testing listed in the aforementioned Scope of Testing. Testing occurs only within the laboratory. Laboratory space is maintained and monitored to the specifications required for laboratory space and the testing performed. Electronic balances are located away from drafts and doorways in areas where their use is unaffected by vibrations. When necessary, biological sterility is measured using air density plates and recorded. Biological work areas are sterilized between uses. Neighboring test areas of incompatible activities are effectively separated. Specific work areas are defined and access is controlled. Only authorized

laboratory personnel and escorted signed-in visitors may enter the work area. Good housekeeping measures are employed to avoid the possibility of contamination. Smoking is prohibited.

All equipment and reference materials required for the accredited tests being performed are readily available in the laboratory.

Records are maintained for all equipment, reference measurement materials, and services used by the laboratory. Equipment manuals and other documentation can be found in the Equipment and Supply Documentation folder in the laboratory filing cabinet.

Reference materials traceable to national standards of measurement or to national standard reference materials are stored away from heavy use areas or major equipment that may affect the proper operation of the materials. Certificates of Traceability are any appropriate reference materials. The reference materials are used only for calibration to maintain the validity of performance.

Where applicable, test method SOPs shall specify laboratory environment requirements. The laboratory will monitor, control, and record environmental conditions as required. Temperatures for refrigerators and freezers are recorded daily when in use.

Procedures for Calibration, Verification, and Maintenance of Equipment (V1M2 5.5)

Equipment is maintained, inspected, and cleaned according to written Equipment Maintenance Procedures. Any defective item of equipment is clearly marked and taken out of service until it has been shown to perform satisfactorily.

Each item of equipment or reference material is labeled to show its calibration status.

Equipment and reference material records include:

1. Name of item of equipment or reference material
2. Manufacturer, identification, serial number
3. Date received and placed in service
4. Current location
5. Condition when received
6. Copy of manufacturer's instructions or manuals
7. Dates and results of calibrations/verifications and date of next calibration/verification
8. Details of maintenance carried out to date and planned for the future
9. History of any damage, malfunction, modification, or repair

Service of equipment is performed by trained staff or qualified service organizations. All records and certificates from service calls are retained.

Support equipment calibrations are verified annually using NIST traceable references over the range of use. Balances, ovens, refrigerators, freezers, incubators, and water baths are checked with NIST traceable references (where possible) on each day of use daily and recorded. Additional monitoring as prescribed by

the test method SOP is recorded. Mechanical volumetric dispensing devices are checked for accuracy quarterly and recorded.

Initial and continuing calibration verification requirements are detailed as appropriate in analytical method SOPs.

Traceability of Measurements (V1M2 5.6)

Verification and/or validation of equipment, such as, balances and thermometers shall be performed with National Institute of Standards and Technology (NIST) traceable standards whenever possible. Calibration certificates must indicate NIST traceability along with measurement results and the associated uncertainty and/or a statement of compliance with an identified metrological specification, such as tolerance. Reference standards, such as Class S weights and NIST traceable thermometers, are used for calibration only and shall be calibrated by an organization that can provide traceability to NIST. Volumetric glassware, if not serialized and calibrated by the manufacturer or Class A, is checked quarterly in house using a documented gravimetric technique.

Treatment of Reference Standards and Materials (V1M2 5.6.3)

The laboratory shall handle and transport all reference standards and materials in a way that protects their integrity and the safety of the staff. Reference standards and materials are stored according to manufacturer's recommendations and separately from working standards or samples.

Prepared reference standards shall be calibrated according to a defined procedure prior to use. Reference standards shall be calibrated before and after any material adjustment.

The laboratory purchases external reference samples. All reference samples are certified. The laboratory retains the manufacturer's Certificate of Analysis. Reference standards and materials are tracked from purchase, receipt, and storage through disposal. Reference standards shall, when possible, be traceable to SI Units of measurement.

All containers of standards, reagents, or materials, whether original or prepared, are labeled with an expiration date. All containers of prepared standards and reference materials have a preparation date and unique identifier. This identifier is recorded on appropriate worksheets or logbooks to ensure complete traceability throughout the preparation and analytical process.

For a current list of stocked reference standards, please see the Reference Standards Log, FRM.M.20.040, located in the Equipment and Materials QMS binder.

Upon receipt of any calibration materials, such as reference standards, any abnormalities or departures from specified condition requirements shall be documented.

Calibration/Verification of Test Procedures

Calibration and/or verification procedures are designed to ensure that the data will be of known quality and be appropriate for a given regulation or decision. Details of instrument calibration and/or test verification procedures including calibration range, standardizations, calculations and acceptance criteria are included or referenced in each test method SOP.

Sufficient raw data are retained to reconstruct the calibration used to calculate the sample result.

All calibrations are verified with a second source standard which is traceable to a national standard, when available.

Calibration standards include a concentration at or below the regulatory/decision level but above the laboratory's detection limit.

Results of samples must be within the calibration range (bracketed by standards) or the results must be flagged as having less certainty. No data associated with a calibration that is out-of-control will be reported.

The limit of quantitation LOQ is defined by the calibration range and is verified annually. The LOQ shall be verified annually for each matrix, technology, and analyte.

Sample Collection (V1M2 5.7, 5.8)

Sample Acceptance Policy

Designated employees and trained sample collectors are the only official collectors of samples. Collection is performed using approved plastic or glass containers of sufficient volume containing the necessary preservatives and chlorine neutralizing agents. Microbiology samples are collected in sterile containers. Samples that have not been properly stored during transport to the laboratory shall not be accepted unless authorized by the client in writing for informational purposes only. Containers that are found at receipt to be compromised, cracked or leaking, will not be accepted.

Each sample container will be uniquely identified using a durable (water resistant) label. For this laboratory, the laboratory ID along with the collection date will be used to mark the samples submitted. Samples that require holding at 6^{o}C and which are hand delivered to the laboratory immediately after collection must be transported on ice in order to demonstrate that the chilling process has begun. The sample acceptance policy is available to the sample collectors. If any samples do not meet any requirements of the acceptance policy, the samples are not accepted for testing, and re-sampling is requested. The client is notified.

Obtaining sample aliquots from a submitted sample as part of the test method is carried out using procedures as written in each method SOP. Appropriate techniques to obtain representative sub-samples are employed and documented in the method SOP.

The samples must be submitted to the laboratory with records of laboratory ID, client name, date and time of collection, collector's name, preservation, sample type, and remarks. Complete preservation and handling instructions are furnished to the sample collectors.

Sampling methods should follow the laboratory's sampling SOP unless other sampling procedures are required by any laws or regulations associated with the testing to be performed.

Summary of Sampling and Handling Requirements

Analysis Type	Sample Type	Minimum Sample Size Required
Cannabinoid Profile	Flower* Concentrate Alcohol Tincture Food Oil Infused Product	1g 0.5g 2 mL 3g 10g
Terpene Profile	Flower Concentrate	1g 0.5g
Pesticide Analysis	Flower* Concentrate Alcohol Tincture Food Oil Infused Product	1.5g 1g 2 mL 5g *Not Accepted*
Microbiology Analysis (Yeast and Mold, E. coli, or Salmonella)	Flower* Concentrate Alcohol Tincture Food Oil Infused Product	1g 0.5g 1 mL 2g *Not Accepted*
Residual Solvent Analysis	Concentrate Alcohol Tincture	0.5g 1mL
Water Activity and Moisture Content Determination	Flower	1g
Homogeneity	Cannabinoid Products Other than Edibles Infused Edibles	20 samples or units of similar size

Sample sizes listed are required unless otherwise required by any appropriate laws or regulations associated with the type of testing being conducted.

Sample Receipt Protocol

Upon receipt, the condition of the samples, including all items specified in the sample acceptance policy, are checked and recorded.

Sample records are linked to the sample ID and include all required information specified by the sample acceptance policy, the 2009 TNI Standard, and any applicable laws or regulations.

Samples are stored according to conditions specified in each test SOP. The laboratory has documented procedures and appropriate facilities to avoid deterioration, contamination, or damage to samples during storage, handling, preparation, and testing. Storage conditions are maintained, monitored, and recorded.

Sample Handling (V1M2 5.8)

Obtaining sample aliquots from a submitted sample as part of the test method is carried out using procedures as written in each method SOP. Appropriate techniques to obtain representative sub-samples are employed. Each sample container will be uniquely identified using a durable label or permanent marker. For this laboratory, the laboratory ID along with the collection date will be used to mark the samples submitted.

The sample acceptance policy is documented and available to the sample collectors. If any samples do not meet any requirements of the acceptance policy, the data is flagged in an unambiguous manner clearly defining the nature and substance of the variation. The sample receipt protocol is documented. The condition of the sample, including any abnormalities or departures from standard condition as prescribed in the relevant test method, is recorded.

Receipt of all samples is recorded in a permanent chronological record, order management system, or log book. The log contains the laboratory ID, date of receipt or collection, sample name, sample type, client, contact, and analyses requested. Sample records which are also available and linked to the sample ID include all required information specified by the sample acceptance policy, the TNI Standard, and any applicable laws or regulations.

Samples are stored according to conditions specified in each test SOP and the Sample Requirements table of the Sample Acceptance Policy. The laboratory has documented procedures and appropriate facilities to avoid deterioration, contamination, or damage to samples during storage, handling, preparation, and testing. Storage conditions are maintained, monitored, and recorded where necessary.

Sample Holding Times

Samples must be extracted within 7 days of receipt. Extracted liquors must be analyzed within 14 days of extraction. Samples delivered to the laboratory on the same day of sampling may be deemed acceptable if chilled or on ice. If analysis occurs within 15 minutes of sampling, preservation is not required.
Sample preservation shall be verified prior to all analyses except for volatile organic analyses (example: terpenoids, residual solvents), in which case the preservation status can be verified post analysis.

Chain of Custody Procedures

Proper traceable chain of custody shall be documented from the time the laboratory accepts a sample to the time of data realization. Anytime a sample is transferred to another entity other than the laboratory, chain of custody must be documented. Upon sample intake, chain-of-custody reflecting the transfer of material from the client to the laboratory shall be documented. Invoices produced by the order management system, Confident Cannabis, produce these signatory lines on the order invoice. Anytime the laboratory subcontracts a sample to another lab, chain-of-custody documentation shall be recorded indicating the date, time, sample IDs, and addresses associated with the transfer.

Labware

Labware is washed according to labware washing procedures appropriate for each piece of labware according to its intended use. All glassware used for volumetric measurements is Class A glassware. All glassware is made of borosilicate or other non-corrosive material, free of chips and cracks, with readable measurement marks. A volumetric equipment verification log is maintained to document daily calibration of all volumetric dispensers used.

Any washed labware intended for use in microbiological analysis is tested for possible presence of residues that may inhibit or promote growth of microorganisms by performing Inhibitory Residue Tests initially and each time the lab changes detergent formulation or washing procedures. Refer to SOP M.30.031 and M.10.030 regarding washing of labware.

Proficiency Testing

The laboratory reports its participation in an accredited proficiency testing program for each category of ELAP approval semi-annually. ORELAP PT studies may be used when available. The results are used to evaluate the ability of the laboratory to produce accurate data. Proficiency test reports along with all raw data necessary to reconstruct the analyses are retained at the laboratory.

PTs are completed no sooner than 5 months apart and no later than 7 months apart. Results of PTs shall be delivered to the accrediting body by the PT provider.

Internal Quality Control Procedures (V1M2 5.9)

The data acquired from quality control (QC) procedures are used to estimate the quality of analytical data, to determine the need for corrective action, and to interpret results after corrective actions are implemented. Each method standard operating procedure (SOP) includes detailed QC procedures and QC limits. QC limits are generated where no method limits exist. QC limits for laboratory control samples (LCS) and matrix spikes (MS) are based on the historical mean recovery plus or minus three standard deviations units. Duplicate limits for precision range from zero to 3.27 times the mean of the historical differences or relative percent differences.

(In cases where historical data is not available, interim QC limits will be used until 20 data points are available to calculate QC limits. Interim QC limits for LCS and MS will be 70% - 130% recovery. Interim QC limits for duplicates will be 20% relative percent difference.)

All quality control measures are assessed and evaluated on an on-going basis. Analytical data generated with QC samples that fall within prescribed acceptance limits indicate the test method was in control. Data generated with QC samples that fall outside QC limits indicate the test method was out of control. These data are considered suspect and the corresponding samples are reanalyzed or reported with qualifiers if reanalysis is not possible.

Method Blanks are performed at a frequency of one per batch of twenty or fewer samples. The results are used to determine batch acceptance. When blanks exceed the method SOP limits, the source of the contamination is investigated and measures are taken to correct, minimize and eliminate the problem.

Laboratory control samples are performed at a frequency of one per batch of twenty or fewer samples. The results are used to determine batch acceptance.

Matrix spikes are performed as necessary to evaluate the recovery efficiency of new sample matrices. The results are used to determine the existence of matrix effects in the spike sample. A matrix effect is indicated if the LCS data are within QC limits but the matrix spike data exceed QC limits.

Matrix duplicates are recommended to be performed at a frequency of one per twenty or fewer samples. Matrix duplicates are a measure of precision. If a duplicate result falls outside QC limits the original sample and the duplicate sample data is regarded as unreliable and a new analysis must be performed. See Appendix B for General QC Parameters and method SOPs for specific QC requirements and procedures.

Results shall be rounded to two decimal places prior to performing QC measurements.

Exceptionally Permitted Departures from Documented Policies and Procedures or From Standard Specifications

The TD has responsibility for ensuring the lab's policies and procedures are adhered by all technicians and analysts. Arrangements for known and controlled departures from documented policies and procedures are allowed. Planned departures do not require audits, however, the departure will be fully documented including the reason for the departure, the effected SOP(s), the intended results of the departure and the actual results. If the data reported to the authority or client is affected adversely, it will be notified in writing. The corrective action procedure is used for documenting this process.

Deviations from documented policies and procedures shall only occur if the deviations is documented, justified, authorized, and accepted by the client.

Reporting Analytical Results (V1M2 5.10)

The results of each test carried out by the laboratory are reported accurately, clearly, unambiguously, and objectively. Analytical results shall include this information for the client in the report of laboratory sample analysis:

1. Title;
2. Name and address of laboratory, and location where the test was carried out if different from the address of the laboratory and phone number with name of contact person for questions;
3. Unique identification of report and each page, including the total number of pages;
4. Name and address of client, where appropriate and project name, if applicable
5. Description and unambiguous identification of the tested sample including the client identification code;
6. Identification of results derived from any sample that did not meet sample acceptance requirements, such as, improper container, holding time, or temperature;
7. Date of receipt of sample, date and time of sample collection, date(s) of performance test, and time of sample preparation and/or analysis if the required holding time for either activity is less than or equal to 72 hours.
8. Identification of test method used, or unambiguous description of any non-standard method used;
9. If the laboratory collected the sample, reference to the sampling procedure;
10. Any deviations from (such as failed QC), additions to or exclusions from the test method (such as environmental conditions), and any non-standard conditions that may have affected the quality of the results, including the use and definitions of data qualifiers;
11. Measurements, examinations and derived results, supported by tables, graphs, sketches and photographs as appropriate, and any failures identified; reporting units on a wet or dry basis;
12. When required a statement of the estimated uncertainty of the result;

13. A signature and title, or an equivalent electronic identification of the person(s) accepting responsibility for the content of the of the report, and date of issue;
14. Clear indication of data provided by outside sources, such as subcontracted laboratories, clients etc; and,
15. Clear identification of numerical results with values outside of quantitation limits.

Non-accredited analyses shall be clearly qualified.

Results shall be rounded to two decimal places.

Subcontracted laboratories are identified by name and/or accreditation number on the report. A copy of the subcontractor's report shall be made available to the respective client upon request.

If a previously issued report must be amended or supplemented, the original shall remain and an amended copy shall be produced which clearly signifies on the report that the report is a supplement or amendment to another report.

If the laboratory discovers equipment used to derive results in any report casts doubt on the validity of the result it shall notify the client(s) in writing.

In the case of tests performed for internal customers, or in the case of a written agreement with the customer, results may be reported in a more simplified manner.

The laboratory shall, where clients require transmission of test results by telephone, facsimile or other electronic means, follow documented procedures that ensure that the above requirements are met and that confidentiality is preserved.

Confidentiality and Proprietary Rights

The laboratory's Client Privacy Policy is detailed in document POL.100.010. Reports of laboratory analysis will only be released to the named contact person or authorized representative on the sample submittal form, contract, or client information form, unless otherwise required by law. Proprietary information, if provided by the client, will be protected as Confidential Business Information in accordance with Title 40, Code of Federal Regulations, Part 2, Subpart B.

Government laboratory information is subject to the Freedom of Information Law. Requests for such information are directed to the Municipal Attorney for processing.

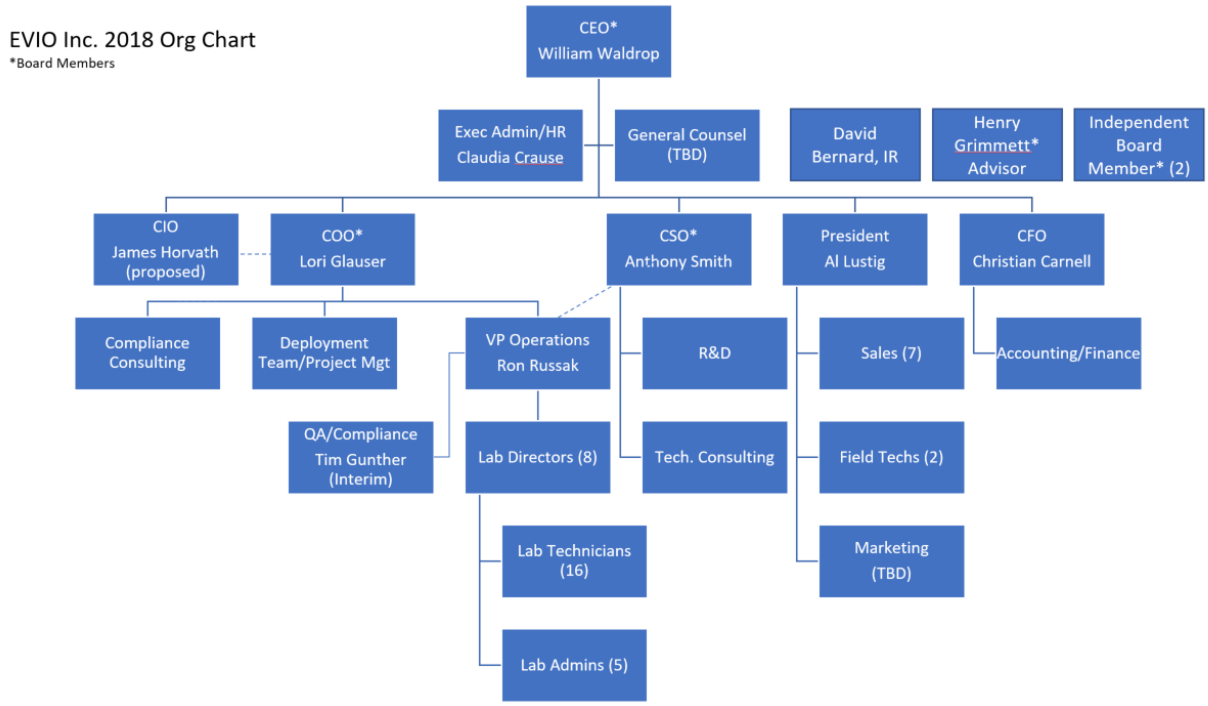
References

ISO 10725, Acceptance sampling plans and procedures for the inspection of bulk materials, 2000.

National Environmental Laboratory Accreditation Conference (NELAC), 2003 NELAC Standard, Approved June 5, 2003, Effective July 1, 2003, 324 pp (EPA/600/R-04/003).

National Environmental Laboratory Accreditation Conference (NELAC), 2009 NELAC Standard, Approved August 24, 2009, Effective July 1, 2011.

Appendix A –EVIO Labs Organizational Chart



Appendix B– General QC Parameters

QC Sample Type	Definition	Required Per Batch?	In Control Specs	OOC Procedures
Matrix Duplicate	Second preparation of an unknown sample used to measure precision	Recommended one per 20 samples per sample type	< 20% RPD	Perform dilution duplicates to check for dilution errors. Prepare a triplicate preparation to identify potential prep bench errors.
Dilution Duplicate	Second dilution of a sample liquor used to detect dilution error	No	<10% RPD	Perform matrix triplicate with larger sample size to determine heterogeneity
Method Blank	A matrix containing no target analytes in order to detect analyte contamination	**Yes**, required one per 20 samples	<LOQ for target analytes	Investigate sources of analyte contamination and take corrective actions; re-prepare the batch
Solvent Blank	Pure solvent matrix with no detectable analytes, used to detect instrument contamination	No	<LOQ for all analytes but solvent	Run solvent blank again to verify detections. Prepare fresh solvent blank from new solvent lot if solvent contamination is suspected. Consider column replacement if severe instrument contamination is suspected
Laboratory Control Sample	Batch QC consisting of a lab matrix with known concentrations of target analytes to determine accuracy.	**Yes**, required one per 20 samples	Within 2 standard deviations above and below recovery mean based on historical data (20 data points)	Investigate integrity of LCS material and prepare new LCS batch. Re-prepare sample batch
Laboratory Control Sample Duplicate	Duplicate LCS preparation used to measure precision.	No	<20% RPD	Investigate homogeneity of LCS material; prepare dilution duplicates to investigate dilution error
Matrix Spike	Client sample chosen at random is spiked with known concentrations of target analytes to measure recovery efficiency	No, but recommended	70-130% for cannabinoids Variable for pesticides and solvents	Investigate sample preparation method for ways of improving homogenization and dissolution of sample in solvent.
Matrix Spike Duplicate	Matrix spike sample prepared and spiked in duplicate to measure precision of recovery efficiency	No	<20% RPD	Perform dilution duplicates to investigate potential dilution error; investigate homogeneity of matrix spike material

Appendix C – Glossary of Quality System Terms

Accuracy	The measurement of difference between an observed value and an accepted "known" value.
Analyst	A person who participates in the execution of methods and techniques in the laboratory
Audit	An evaluation for the purposes of determining conformance
Batch	Samples that are prepared or analyzed together by the same analyst using the same procedure and materials. A preparation batch comprises 1 – 20 samples of the same matrix. An analytical batch is a set of samples to be analyzed together in one group, consisting of potentially varying matrices and numbers of samples.
Chain of Custody	Documentation of the history of possession of a sample from sampling to receipt at the laboratory.
Conformance	Affirmation that something has met a set requirement
Data Integrity	The result of processes that assure data is valid and of a known and documented quality
Dilution Duplicate	A duplicate dilution preparation of the same sample solution, typically used to check for pipetting error
Document Control	Ensuring documents are properly edited, reviewed, approved, and distributed
Holding Times	Period of time a sample may be stored prior to analysis. Samples that are analyzed after their holding times have passed must be flagged and properly qualified.
Integrity	Being uncompromised
Laboratory Control Sample	A laboratory quality sample matrix containing a known concentration of target analytes for routine monitoring of recovery among preparation batches
Matrix Duplicate	A duplicate preparation of a sample
Method	Procedures and techniques for performing an activity

National Institute of Standards and Technology (NIST)	Agency of the US Dept. of Commerce's Technology Administration that provides public and commercial groups with a system for providing accredited and traceable laboratory materials and proficiency tests (PTs)
The NELAC Institute (TNI)	A non-profit organization that works to ensure environmental data is reliable and of known and documented quality by providing standards based on international standards and community needs and desires.
National Environmental Laboratory Accreditation Program (NELAP)	Accreditation program a part of TNI
Negative Control	Methods of ensuring that a particular method, material, or environment do not influence inaccurate results.
TNI Standards	Procedures for evaluating and documenting the ability of laboratories to meet nationally defined standards established by TNI
Nonconformance	An event that does not meet a particular requirement
Quality assurance (QA)	A system of activities working to enforce, monitor, and improve the quality of laboratory performance
Quality control (QC)	A system of activities working to measure quality performance in laboratory activities
Quality control sample	A sample used to evaluate the performance of something
Quality manual	A document outlining the laboratory's quality system containing basic laboratory management policies, quality objectives, organizational structure, and more.
Quality system	A structured and documented management system for outlining, monitoring, and improving the quality of services and data produced by the laboratory.
Reference Standards	Material used to calibrate measurements, typically known concentrations of one or more analytes
Sampling	Activity related to the collection of a representative sample of some object or batch of objects

Shall	Imperative term indicating a mandatory requirement
Should	Conditional term indicating a recommendation
Standard operating procedure (SOP)	A document detailing procedures for accomplishing routine tasks
Reference method	A method issued by an organization that is accepted as competent
Traceability	The ability to trace the history of something through records
Validation	Confirmation of something through extensive evaluation and verification of conformance against established acceptance criteria

EVIOLABS

SOP Title:	Document and Record Control Procedures
SOP No:	SOP.QA.40.001
Revision No:	1.2

Revision Record

Revision No.	Date	Editor	Description of Change
1.0	5/1/2017	Jason Wilson	Initial version
1.1	6/5/2017	Jason Wilson	Added information about building DCR folders on the EVIO Google Drive.
1.2	5/18/2018	Lori Glauser, Ellen Parkin	Update to incorporate PowerDMS functionality, new procedures for DCR submission and approval, control of records

Document and Record Control Procedures

Contents

Document and Record Control Procedures

1. Purpose, Scope and Applicability

This SOP describes how documents and records are controlled, reviewed and maintained as per 4.3 and 4.13 in 2009 TNI Standard. This process is meant to ensure that quality system documents and records used by employees are accessible, up-to-date, confidential, and secure. Quality system documents primarily include standard operating procedures, policies and forms. Records primarily include data output, bench sheets, reports, and internal audits. These procedures apply to both electronic and physical documents.

The functions and purpose of the document control system are:

- To approve documents for adequacy prior to issue
- To review and update as necessary and re-approve documents
- To ensure that changes and the current revision status of documents are identified
- To ensure that relevant versions of applicable documents are available at points of use.
- To ensure that documents remain legible and readily identifiable
- To ensure that documents of external origin determined by the organization to be necessary for the planning and operation of the QMS are identified and their distribution controlled
- To prevent the unintended use of obsolete documents, and to apply suitable identification to them if they are retained for any purpose.

EVIO Labs a document control system, PowerDMS, for identifying, drafting, changing, and monitoring documents as well as communicating significant changes to employees.

2. Definitions

Controlled copy - A controlled copy is a formal copy of the latest, correct issue of a document; an identified issue of a document to an individual or location of record. The controlled copy is officially tracked, updated and made obsolete as appropriate to assure that is the accessible version of the document is current and approved.
DCR – document change request
Document – including, but not limited to, forms, procedures, policies, training materials, job aides, notices, and charts.
Uncontrolled copy - An informal copy of a document for which no attempt is made to update it after distribution; the document is marked “Uncontrolled” and the user determines if the document is active prior to use. Controlled documents are maintained in electronic form in a central data repository with controlled access. Documents are considered uncontrolled once they are printed or downloaded from the controlled document system.

Obsolete copy – A controlled or uncontrolled copy of a document which has been superseded by a subsequent revision number or are no longer being used. Obsolete documents are to be archived and access controlled to avoid the use of documents featuring outdated or incorrect information.

Minor changes or revisions - Those changes that do not affect the content of quality of the action being prescribed in the document, such as typographical or grammatical changes, template formatting or small non-material changes within the document.

Major changes or revisions - Those changes which affect the content of quality of the action being prescribed in the document, such as updated technology or process resulting in change of procedure or multiple changes within the document.

Record – including, but not limited to, reports, reviews, batch sheets, analysis output, calibration reports, and transfer manifests.

3. Procedure Summary

The document control process includes document identification, drafting, review, modification, approval, issuance, notification, and archiving. When a change to a document is needed, any company employee may submit a document change request to the Quality Assurance Officer (QAO) for review and escalation for approval. Once approved, the document shall be changed and reissued with an updated revision number. When a document is obsolete, it is identified as such and archived.

4. Equipment & Materials

Document Change Request Form, FRM.QA.400.010

5. Responsibilities

Quality Assurance Officer (QAO) or Designated Document Controller
Responsible for overall management of document control system and responsible for reviewing document change requests and ensuring that requests are consistent with quality control requirements and executive management intentions.

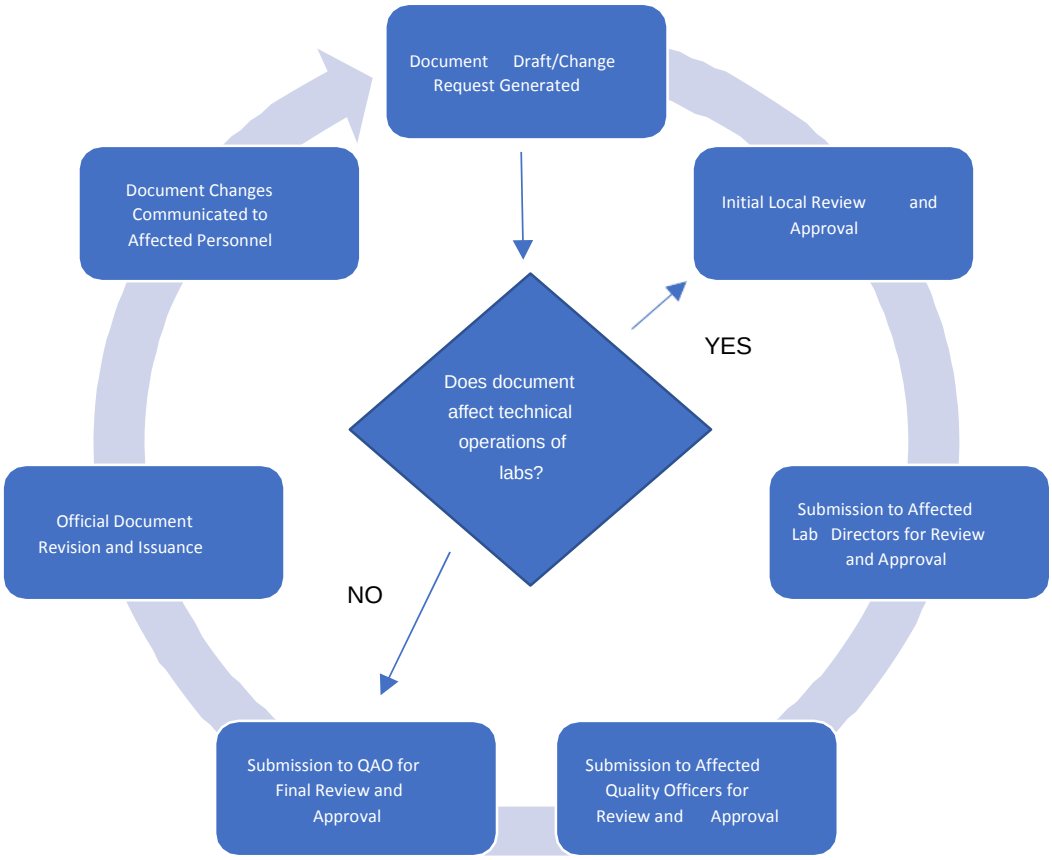
Chief Science Officer (CSO)
Responsible for final review of document changes affecting technical procedures or policies. Responsible for final determination of technical changes to documents and coordinates with QAO during document change request review and approval.

Lab Director or Designated Quality Analyst
Responsible for: coordinating with local quality analyst when reviewing initial document change requests; reviewing technical accuracy and suitability of documents affecting data realization; coordinating with other lab directors to review document changes that affect technical procedures; and, coordinating with quality officers to ensure new revisions of documents are made available for other lab employees.

Document and Record Control Procedures

6. Document Control Procedures

6.1. Document Control and Maintenance Process



6.2. Document Formatting

6.2.1. Forms

6.2.1.1. All forms shall feature “EVIO Labs”, the filename prefix FRM, the document ID, effective date, revision number, and “Uncontrolled When Printed” in the footer.

6.2.2. SOPs

6.2.2.1. All SOPs shall feature a cover page featuring the EVIO Labs logo, the document name, document ID, revision number, and effective date.

6.2.2.2. Subsequent pages of SOPs shall feature “EVIO Labs”, the filename prefix “SOP", the document ID, effective date, revision number, page number, and “Uncontrolled When Printed” in the footer.

6.2.2.3. See the Writing an SOP procedure, SOP.QA.400.010, for details on required formatting and contents for SOPs.

6.2.3. Policies

6.2.3.1. All policies shall feature a cover page featuring the EVIO Labs logo, the filename prefix “POL", the document name, document ID, revision number, and effective date.

6.2.3.2. Subsequent pages of policies shall feature “EVIO Labs”, the document ID, effective date, revision number, page number, and “Uncontrolled When Printed” in the footer.

6.2.4. Document Templates

6.2.4.1. Templates may be available for various document types including procedures, policies, reports, and presentations. Templates are stored in the Templates folder in the Document Control folder within the Quality Management folder of the EVIO PowerDMS or file server.

6.3. Document Identification

6.3.1. Documents are identified according to a process driven naming scheme including five primary components including document type, process ID, subprocess ID, subprocess level ID, and revision number, in the following scheme: [DocType].[ProcessID].[SubprocessID].[Level] [Rev#]

Example: FRM.T.20.010 r1.0 refers to the first revision of a form in the first step of the sample control subprocess of the testing and sampling process. In this case, the form is a sampling diagram worksheet.

6.3.1.1. *DocType* refers to a code referring to the document type. The following document types and codes are to be used:

FRM	Form
SOP	Procedure
POL	Policy
QMS	Misc QMS Document
LNB	Laboratory Notebook
TRN	Training Material

6.3.1.2. *ProcessID* refers to a one character identifier of the high level process associated with the document. The following Process IDs shall be used:

T	Testing and Sampling
QA	Quality Assurance/Quality Management
M	Materials and Facilities Management
S	Sales and Marketing
F	Financial Management
H	Human Resources
C	Consulting/R&D

6.3.1.3. *SubprocessID* refers to a two- or three- character identifier of the subprocess associated with the document. The following subprocess IDs may be used:

Document and Record Control Procedures

Process ID	Process Description	Sub-Process ID	Description
T	Analytical Testing	10	Client Intake
		20	Sample Control
		30	Sample Prep
		40	Analysis
		80	QC Admin
		90	Data Reporting
M	Facilities and Materials Management	10	Facilities Upkeep and Maintenance
		20	Equipment/Materials Procurement
		30	Equipment Calibration and Maintenance
		40	Equipment Retirement
		50	Materials Handling and Disposal
		60	Emergency Preparedness
		70	Security
QA	Quality Assurance	10	Corrective and Preventative Actions
		20	Internal Auditing
		30	Customer Feedback
		40	Document Control
		50	Data Integrity Management
F	Financial Management/Consulting	10	Accounts Receivable
		20	Accounts Payable
		30	Equity Management
S	Sales/Marketing	10	Marketing Communications
		20	Customer Engagement
		90	Invoicing
H	Human Resources	10	Prospecting
		20	Hiring and Orientation
		30	Workforce Development
		40	Separation

6.3.1.4. Levels are three characters representing the approximate step of the associated subprocess. For instance, a level ID of 010 indicates the first step of a process, whereas level ID 090 indicates a final step in the process. Level IDs utilize three characters with an emphasis on the second character in order to accommodate potential unforeseeable future changes to process, which may require IDs below 1 or above 9. This allows for flexibility and future changes without significantly disrupting the existing document ID scheme.

6.3.1.5. Rev# refers to revision numbers and are indicated according to the following scheme: “r#.#” where “r” stands for “revision” and “#.#” refers to the revision number. The first number in the revision number signifies major

revisions whereas the second number refers to minor revisions. Major revisions include any changes which substantial change the use of a document, whereas minor revisions include inconsequential changes such as clarifications, formatting adjustments, etc.

6.4. Requesting Document Changes

6.4.1. Any personnel may submit comments to the document in PowerDMS to suggest a document change with approval from their local laboratory director. If a major revision, is needed, personnel should also prompt an email discussion of the changes required to their laboratory director and the EVIO QAO.

6.4.2. For minor revisions:

6.4.2.1. At designated intervals, the QAO or designated document controller complies the comments from each document for a DCR, using FRM.QA.40.010.

6.4.2.2. Each comment will be assessed for validity. If considered an acceptable change, the QAO or designee will make the change to the draft document and record the changes in revision records.

6.4.2.3. Once the changes are completed to the document, the QAO or designated document controller submits the document for review.

6.4.3. For major revisions:

6.4.3.1. Discussions with those personnel affected by any major changes need to be consulted prior to a DCR for the document. This should include lab directors, the EVIO QAO and the CSO.

6.4.3.2. Once consensus has been reached for suggested changes, the QAO or designee generates a DCR with a unique identifier. The QAO assigns an owner for drafting new changes to the document and initiating the workflow review process as per the directives below.

6.5. Drafting Changes to Documents

6.5.1. In PowerDMS, open the document intended for changes.

6.5.2. Hover over the title or document icon along the top of the document and select “Create draft revision”. If a draft is already in progress, select “View draft revision”.

6.5.3. Select “Edit on desktop” and PowerDMS will open an editable document. NOTE: only one person can edit a document at a time.

6.5.4. Generate any changes as indicated by the submitted DCR. Save and close the document – it will now upload back to PowerDMS with the changes.

6.5.5. In the document viewer of PowerDMS, select “Manage Document”. In Revisions, select “Draft” then “Start New” under Workflow. Select “Allow users to edit the draft during the workflow” and initiate the appropriate workflow below.

6.5.5.1. For non-technical review: submit changes directly to the QAO for approval and publication.

6.5.5.2. For technical review:

6.5.5.2.1. Step 1: Lab Director

6.5.5.2.2. Step 2: Other lab directors or their designees at locations that could be affected by these changes.

6.5.5.2.3. Step 3: QAO and CSO for approval and publication.

6.6. Review and Approval of Document Changes

6.6.1. Document changes that do not affect laboratory operations or data realization may be submitted directly to the QAO for control.

6.6.2. Document changes affecting laboratory operations or data realization must be reviewed by technical and quality staff prior to submission to the QAO and CSO (see above workflow steps).

6.6.3. Upon receipt of a document changes for review, the lab director reviews the changes for suitability. Should the lab director determine the changes are suitable, the lab director may make any additions or changes to the request.

6.6.4. Once the lab director has reviewed the changes and made any necessary additions or changes, they indicate approval of the document in PowerDMS.

6.6.5. Upon receipt of a document changes, the Lab Director or QAO shall review the changes for suitability and conformance with quality control and regulatory requirements and make any changes to the request as needed before indicating approval of the document in PowerDMS.

6.6.6. If not already performed, the reviewed changes shall then be submitted to the QAO for final review. If the document changes involve modifications to technical procedures, the QAO shall coordinate with the CSO to ensure requested changes are accurate and appropriate.

6.6.7. If the QAO or CSO deny a document change request, it shall be sent back to the Lab Director with comments describing the rationale for denial and requirements for approval. The Lab Director or designee have an opportunity to either correct any identified issues to allow approval, or the group may accept the denial and discontinue the pursuit of document change.

6.6.8. Once a document changes has been approved, the QAO shall publish the new changes in PowerDMS.

6.7. Issuing New or Revised Documents

6.7.1. The QAO manages all final document editing and reissuing. No employees may revise and reissue a controlled document without approval from the QAO or an executive.

6.7.2. New or revised documents shall feature new revision numbers and effective dates as well as information in the document’s revision history, detailing what was changed.

6.7.3. On publication in PowerDMS, the most recent publication will be archived automatically and only the new publication will be accessible to the staff.

6.7.4. Any new document is uploaded to PowerDMS by selecting “New” and “Document”. A new file can be uploaded here or create from a document template, such as the SOP template (FRM.QA.410.010).

6.7.5. Upon issuance of a newly revised document, PowerDMS will notify all assigned users to review and sign off on the new document.

6.8. Document Retention

6.8.1. All documents including obsolete and prior revisions of controlled documents and workpapers must be retained for at least five years.

6.8.2. The document management system and any company file servers shall have backup and restore capability to protect against a loss of data.

6.9. Handling Obsolete Documents

6.9.1. Using PowerDMS, obsolete documents will be immediately archived. The document will no longer be available for circulation.

6.9.2. Access to obsolete documents shall be controlled by QAO to ensure that uncontrolled documents are not placed in use.

6.10. Document Control Monitoring

6.10.1. All documents are managed centrally by the Quality Assurance Officer. A master list can be generated through PowerDMS by the QAO which details all current active documents and their revisions.

6.10.2. The Master Document List can be found in the Document Control folder within the Quality Management System folder on the EVIO PowerDMS.

7. Record Control Procedures

7.1. General Records Control

7.1.1. All records must be legible in permanent ink and retained for review and audit purposes.

7.1.2. All records must be secure and confidential

7.1.3. All observations must be recorded at the time of observation and initialed by the personnel responsible.

7.1.4. Any mistakes must be crossed out with a single line and the individual correcting the error must initial and date the correction.

7.2. Records for Historical Reconstruction

7.2.1. The laboratory must retain all records of original observations, data, and sufficient information to determine an audit trail. This includes all information noted in 4.13 of the 2009 TNI Standard.

7.3. Records Retention

7.3.1. All records, hard copy or electronic media, must be retained for a minimum of five years.

8. Quality Control

8.1. Document change requests are audited within the yearly audit schedule and examined for completion. All documents will be reviewed at least annually to ensure compliance and suitability.

9. Safety

N/A

10. References

https://www.qemsolutions.com/assets/library/QHelp-A-Simple-Guide-to-Document-Control_2.pdf

PowerDMS Help System:
https://success.powerdms.com/s/

11. Appendix

N/A

EVIO Labs Policy, POL.M.70.001 R0.0 Restricting Access to Minors

Overview

The company is committed to ensuring that no cannabis products are diverted from our facility at any point of our supply chain. We take particular measures to ensure that that minors under the age of 21 do not enter the lab or obtain or attempt to obtain cannabis items from our lab or from lab employees.

The company maintains comprehensive policies and procedures that are implemented by management to ensure the prevention of diversion of cannabis through diligent security measures. The provisions include measures to prevent agent or third-party theft or transfer of cannabis products to an unqualified individual including minors. Supply-chain security is designated as a primary job duty of all managers, reinforcing a company-wide culture of responsibility. The Lab Director will be ultimately responsible for the development and implementation of the following Anti-Diversion Plan, and all employees responsible for implementation of the plan.

Restricting Access to Minors

Our company first takes every measure to ensure that minors do not enter the licensed premise. This includes verifying that all persons, including visitors who enter the premises are over the age of 21, and ensuring appropriate signage indicating that no minors are allowed on premises, as required.

Limit Advertising

The company shall not advertise cannabis testing services in a manner that is attractive to minors.

Any advertisements will not contain any content that can reasonably be considered to target individuals under the age of 21, including but not limited to cartoon characters, toys, or similar images and items typically marketed towards minors.

Limit Minors Near Premises

The site will be monitored by security, and should there be any loitering of individuals around the facility, and in particular minors, they will be asked to leave the premises.

Employee Prohibitions

Employees are trained not to serve minors in any fashion, including providing them product on or away from the premises. Any employee discovered knowingly providing recreational cannabis to minors at any time will be terminated.

Checking Identification

For an Identification to be valid it must have been issued by a government. It must also be a current identification, include the persons photograph, and include the persons birthdate. The procedures for correctly checking an identification are as follows.

- Examine in a well-lit area
- Tilt the ID under light to see all the reflective seals and holograms flash
- Check the overall condition of the card – minors often use the expired license of a family member or friend
- Visually and manually confirm that the ID's size, weight and shape are normal and that the photo, lettering and lamination haven't been switched, altered or tampered with
- Check for uneven surfaces and edges as well as cuts or bubbles in the laminate

Identifying False Identification

If the colors on the identification are dull or faded or if the birth or expiration dates look scratched this is not an acceptable form of identification. If the identification has appeared to be tampered with at ll it is not valid. The identification should have no cuts, tears, bumps, or uneven lamination. All the letters should be in the same font and same size of font. Look for misspelled words or disclaimers. Compare identification photo and description. Descriptors such as height, weight, eye and hair color are the most likely and easiest to change. Pay attention to the shape and size of the facial features. Keep on file a copy of a current legitimate ID available for comparison's sake.

Signage

The company may post a sign in a conspicuous location near the entrance that reads “No Minors Permitted Anywhere on This Premises”.

EVIO Labs Policy, POL.F.90.001 R0.0 Maintenance of Financial Records

EVIO Labs maintains records in accordance with EVIO SOPs, including SOP.QA.40.001 *Document and Record Control Procedures* as well as with federal accounting guidelines (GAAP) and requirements of the Securities and Exchange Commission. All records, including financial records, are maintained for a period of at least 7 years. Records are backed up to cloud computing systems, and are archived each quarter.

SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Basis of Presentation

A summary of significant accounting policies of EVIO, INC. (the "Company") is presented to assist in understanding the Company's financial statements. The accounting policies presented in these footnotes conform to accounting principles generally accepted in the United States of America and have been consistently applied in the preparation of the accompanying financial statements. These financial statements and notes are representations of the Company's management who are responsible for their integrity and objectivity.

Principles of Consolidation

The Company prepares its consolidated financial statements on the accrual basis of accounting. The accompanying consolidated financial statements include the accounts of the Company and its wholly and partially owned subsidiaries, all of which have a fiscal year end of September 30. All intercompany accounts, balances and transactions have been eliminated in the consolidation.

The Company consolidates its subsidiaries in accordance with ASC 810, and specifically ASC 810-10-15-8 which states, the usual condition for a controlling financial interest is ownership of a majority voting interest, and, therefore, as a general rule ownership by one reporting entity, directly or indirectly, or over 50% of the outstanding voting shares of another entity is a condition pointing toward consolidation."

Cash and Cash Equivalents

For purposes of the statement of cash flows, the Company considers all short-term debt securities purchased with original maturity of three months or less to be cash equivalents.

Accounts Receivable and Allowance for Doubtful Accounts

Accounts receivable are recorded at their original invoice amounts. We regularly review collectability and establish an allowance for uncollectible amounts as necessary based on our experience with historical

collectability. Management has determined that a reserve for uncollectible amounts was not required in the periods presented.

Notes Receivable

The Company accounts investments for notes receivable in accordance with ASC 320.

Goodwill and Other Intangible Assets

Goodwill and indefinite-lived intangible assets are not amortized, but are evaluated for impairment annually or more often if indicators of a potential impairment are present. Our annual impairment tests are conducted at the beginning of the fourth quarter. We use a two-step process to quantitatively evaluate goodwill for impairment. In the first step, we compare the fair value of each reporting unit with the carrying amount of the reporting unit, including goodwill. If the estimated fair value of the reporting unit is less than the carrying amount of the reporting unit, we complete a second step to determine the amount of the goodwill impairment that we should record. In the second step, we determine an implied fair value of the reporting unit's goodwill by allocating the reporting unit's fair value to all of its assets and liabilities other than goodwill (including any unrecognized intangible assets). We compare the resulting implied fair value of the goodwill to the carrying amount and record an impairment charge for the difference. We test individual indefinite-lived intangible assets by comparing the estimated fair value with the book values of each asset.

The Company recognizes an acquired intangible apart from goodwill whenever the intangible arises from contractual or other legal rights, or whenever it can be separated or divided from the acquired entity and sold, transferred, licensed, rented or exchanged, either individually or in combination with a related contract, asset or liability. Such intangibles are amortized on a straight-line basis over their estimated useful lives unless the estimated useful life is determined to be indefinite. The Company's intangible assets consist of client lists (amortized over five years), websites and domain names (amortized over 15 years) and testing licenses (amortized over 5 years).

Business Combinations

We have adopted the amendment to ASC 805 for the accounting for business acquisitions both during the period of the acquisition and in subsequent periods. Among the more significant changes in the accounting for acquisitions are the following:

- Contingent consideration is recorded at fair value as an element of purchase price with subsequent adjustments recognized in operations.
- Subsequent decreases in valuation allowances on acquired deferred tax assets are recognized in operations after the measurement period.
- Upon gaining control of an entity in which an equity method or cost basis investment was held, the carrying value of that investment is adjusted to fair value with the related gain or loss recorded in earnings.

Reclassification

Certain amounts in the 2016 financial statements have been reclassified to conform to the 2017 financial presentation. These reclassifications have no impact on net loss.

Use of Estimates

The preparation of financial statements in accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenses during the reporting period. A change in managements' estimates or assumptions may have a material impact on the financial condition and results of operations of the Company during the period in which such changes occurred. Actual results could differ from those estimates. The Company's financial statements reflect all adjustments that management believes are necessary for the fair presentation of their financial condition and results of operations for the periods presented.

Revenue Recognition

It is the Company's policy that revenues and gains will be recognized in accordance with ASC Topic 605-10-25, "Revenue Recognition." Under ASC Topic 605-10-25, revenue earning activities are recognized upon the sale and delivery of its products and services. The Company generates revenue from consulting services provided to clients in the cannabis industry, licensing agreements as well as testing of cannabis and cannabis products for both medicinal and recreational consumption. The Company accepts orders for testing services which are generally completed within two weeks of receiving the order. Revenue is recognized from testing services upon delivery of the testing results to the client. Consulting engagements vary in length and scope but generally include reviewing regulatory filings, business plans and providing financial models to partners within the same industry. Revenue is recognized from consulting services upon completion of deliverables as outlined in the consulting agreement. The Company recognizes revenues from license agreements as deliverables within the agreement are met, typically training, providing the licensee with access to trademarks and other licensed materials and ongoing remote support.

Cost of Revenue Recognition

The Company recognizes all costs incurred that are directly related to revenue generating activities as a cost of revenue. These costs include salaries and payroll taxes associated with lab employees, rent and utilities on lab facilities, depreciation of lab equipment and outsourced professional services utilized for consulting engagements.

Stock-Based Compensation

The Company applies Topic 718 "Share-Based Payments" ("Topic 718") to share-based compensation, which requires the measurement of the cost of services received in exchange for an award of an equity instrument based on the grant-date fair value of the award. Compensation cost is recognized when the event occurs. The Black-Scholes option-pricing model is used to estimate the fair value of options granted.

The Company accounts for equity-based transactions with non-employees under the provisions of ASC Topic No. 505-50, "Equity-Based Payments to Non-Employees" ("Topic No. 505-50"). Topic No. 505-50 establishes that equity-based payment transactions with non-employees shall be measured at the fair value of the consideration received or the fair value of the equity instruments issued, whichever is more reliably measurable.

Income Taxes

The Company uses the asset and liability method of accounting for income taxes in accordance with ASC 740-10, "Accounting for Income Taxes." Under this method, income tax expense is recognized for the amount of: (i) taxes payable or refundable for the current year; and, (ii) deferred tax consequences of temporary differences resulting from matters that have been recognized in an entity's financial statements or tax returns. Deferred tax assets and liabilities are measured using enacted tax rates expected to apply to taxable income in the years in which those temporary differences are expected to be recovered or settled. The effect on deferred tax assets and liabilities of a change in tax rates is recognized in the results of operations in the period that includes the enactment date. A valuation allowance is provided to reduce the deferred tax assets reported if, based on the weight of available positive and negative evidence, it is more likely than not that some portion or all of the deferred tax assets will not be realized.

ASC 740-10 prescribes a recognition threshold and measurement attribute for the financial statement recognition of a tax position taken or expected to be taken on a tax return. Under ASC 740-10, a tax benefit from an uncertain tax position taken or expected to be taken may be recognized only if it is "more likely than not" that the position is sustainable upon examination, based on its technical merits. The tax benefit of a qualifying position under ASC 740-10 would equal the largest amount of tax benefit that is greater than 50% likely of being realized upon ultimate settlement with a taxing authority having full knowledge of all the relevant information. A liability (including interest and penalties, if applicable) is established to the extent a current benefit has been recognized on a tax return for matters that are considered contingent upon the outcome of an uncertain tax position. Related interest and penalties, if any, are included as components of income tax expense and income taxes payable.

Capital Leases

The Company accounts for capital leases in accordance with ACS 840-30.

Concentration of Credit Risk

Instruments that potentially subject the Company to concentration of credit risk consist principally of cash deposits, notes receivable and accounts receivable. As of September 30, 2017, the Company did not hold cash at any financial institution in excess of the amount insured by the Federal Deposit Insurance Corporation ("FDIC") of up to $250,000.

Property and Equipment

Property and equipment are carried at cost. Expenditures for maintenance and repairs are expensed in the period incurred. Renewals and betterments that materially extend the life of the assets are capitalized. When assets are retired or otherwise disposed of, the cost and related accumulated depreciation are removed from the accounts, and any resulting gain or loss is reflected in income for the period.

Depreciation is computed for financial statement purposes on a straight-line basis over estimated useful lives of the related assets and the modified accelerated cost recovery system for federal income tax purposes. The estimated useful lives of depreciable assets are:

	Estimated Useful Lives
Laboratory and Computer Equipment	5 years
Furniture and Fixtures	7 years
Software	3 years
Domains	15 years

Impairment of Long-Lived Assets

The Company evaluates, on a periodic basis, long-lived assets to be held and used for impairment in accordance with the reporting requirements of ASC 360-10. The evaluation is based on certain impairment indicators, such as the nature of the assets, the future economic benefit of the assets, any historical or future profitability measurements, as well as other external market conditions or factors that may be present. If these impairment indicators are present or other factors exist that indicate that the carrying amount of the asset may not be recoverable, then an estimate of the undiscounted value of expected future operating cash flows is used to determine whether the asset is recoverable and the amount of any impairment is measured as the difference between the carrying amount of the asset and its estimated fair value. The fair value is estimated using valuation techniques such as market prices for similar assets or discounted future operating cash flows.

Financial Instruments

Level 1 - Level 1 applies to assets or liabilities for which there are quoted prices in active markets for identical assets or liabilities.

Level 2 - Level 2 applies to assets or liabilities for which there are inputs other than quoted prices that are observable for the asset or liability such as quoted prices for similar assets or liabilities in active markets; quoted prices for identical assets or liabilities in markets with insufficient volume or infrequent transactions (less active markets); or model-derived valuations in which significant inputs are observable or can be derived principally from, or corroborated by, observable market data.

Level 3 - Level 3 applies to assets or liabilities for which there are unobservable inputs to the valuation methodology that are significant to the measurement of the fair value of the assets or liabilities.

The Company's financial instruments consist principally of cash, accounts payable, and accrued liabilities. Pursuant to ASC 820 and 825, the fair value of cash is determined based on "Level 1" inputs, which consist of quoted prices in active markets for identical assets. The recorded values of all other financial instruments approximate their current fair values because of their nature and respective maturity dates or durations.

Basic Earning (Loss) Per Share

The Company computes net income (loss) per share in accordance with Accounting Standards Codification ("ASC") 260, " *Earnings per Share*." ASC 260 requires presentation of both basic and diluted earnings per share (EPS) on the face of the income statement. Basic EPS is computed by dividing net income (loss) available to common shareholders (numerator) by the weighted average number of shares outstanding (denominator) during the period. Diluted EPS gives effect to all dilutive potential common shares

outstanding during the period using the treasury stock method and convertible preferred stock using the if-converted method. In computing diluted EPS, the average stock price for the period is used in determining the number of shares assumed to be purchased from the exercise of stock options or warrants. Given the net losses of the Company during the years ended September 30, 2017 and 2016, the effects of convertible equity and debt instruments were anti-dilutive resulting in basic and diluted loss per weighted average common shares outstanding equal.

Recently Issued Accounting Pronouncements

In February 2015, the FASB issued ASC 2015-02, "Consolidation (Topic 810) - Amendments to the Consolidation Analysis." This standard modifies existing consolidation guidance for reporting organizations that are required to evaluate whether they should consolidate certain legal entities. ASU 2015-02 is effective for fiscal years beginning after December 15, 2015, and requires either a retrospective or a modified retrospective approach to adoption. Early adoption is permitted. The Company adopted has this standard and determined it does not have a significant impact on its consolidated financial statements.

In September 2015, the FASB issued ASU 2015-16, "Business Combinations (Topic 805) – Simplifying the Accounting for Measurement-Period Adjustments." This update eliminates the requirement to restate prior period financial statements for measurement period adjustments. The new guidance requires that the cumulative impact of a measurement period adjustment (including the impact on prior periods) be recognized in the reporting period in which the adjustment is identified. The new standard should be applied prospectively to measurement period adjustments that occur after the effective date. The new standard is effective for interim and annual periods beginning after December 15, 2015 and early adoption is permitted. The Company has adopted this guidance and the adoption of this guidance did not have an impact on the Company's results of operations, financial position, or cash flows for the years ended September 30, 2017 or 2016.

In March 2016, the FASB issued ASU 2016-09, *"Compensation - Stock Compensation (Topic 718): Improvements to Employee Share-Based Payment Accounting."* The amendments in this update simplify several aspects of the accounting for employee share-based payment transactions, including the accounting for income taxes, forfeitures and statutory tax withholding requirements, as well as classification in the statement of cash flows. The Company adopted the new guidance on January 1, 2017. The primary impact of adoption was the recognition of excess tax benefits in our provision for income taxes rather than paid-in capital. However, as the Company has a full valuation allowance against its deferred tax asset, a corresponding adjustment was recorded to increase the valuation allowance.

In January 2017, the FASB issued ASU 2017-04, "*Intangibles—Goodwill and Other (Topic 350), Simplifying the Test for Goodwill Impairment".* The amendments in this update simplify how an entity is required to test goodwill for impairment by eliminating Step 2 from the goodwill impairment test. This update is effective for annual or interim goodwill impairment tests in fiscal years beginning after December 31, 2019. Early adoption is permitted for interim or annual goodwill impairment tests performed on testing after January 1, 2017. The Company notes that this guidance applies to its reporting requirements and will implement the new guidance accordingly in performing goodwill impairment testing; however, the Company does not believe this update will have a material impact on the consolidated financial statements.

In January 2017, the FASB issued ASU 2017-01, "*Business Combinations (Topic 805): Clarifying the Definition of a Business,*" which revises the definition of a business. This update is effective for annual periods beginning after December 15, 2017, including interim periods within those years. Early adoption is permitted. The Company notes that this guidance will impact its acquisitions beginning January 1, 2018.

Management believes recently issued accounting pronouncements will have no impact on the financial statements of the Company.

Recently Issued Accounting Pronouncements (continued)

In April 2016, the FASB issued ASU 2016-10, "Revenue from Contracts with Customers (Topic 606): Identifying Performance Obligations and Licensing" ("ASU 2016-1O"). The amendments in this update clarify the following two aspects to Topic 606: identifying performance obligations and the licensing implementation guidance, while retaining the related principles for those areas. The entity first identifies the promised goods or services in the contract and reduce the cost and complexity. An entity evaluates whether promised goods and services are distinct. Topic 606 includes implementation guidance on determining whether an entity's promise to grant a license provides a customer with either a right to use the entity's intellectual property (which is satisfied at a point in time) or a right to access the entity's intellectual property (which is satisfied over time). The Company is currently evaluating ASU 2016-10 and its impact on its consolidated financial statements or disclosures.

Other accounting standards that have been issued or proposed by the FASB or other standards-setting bodies that do not require adoption until a future date are not expected to have a material impact on our financial statements upon adoption.

Non-Controlling Interest

The Company reports the non-controlling interest in its majority owned subsidiaries in the consolidated balance sheets within the stockholders' deficit section, separately from the Company's stockholders' deficit. Non-controlling interest represents the non-controlling interest holders' proportionate share of the equity of the Company's majority-owned subsidiaries. Non-controlling interest is adjusted for the non-controlling interest holders' proportionate share of the earnings or losses and other comprehensive income (loss) and the non-controlling interest continues to be attributed its share of losses even if that attribution results in a deficit non-controlling interest balance.

Derivative Financial Instruments

Fair value accounting requires bifurcation of embedded derivative instruments such as conversion features in convertible debt or equity instruments and measurement of their fair value for accounting purposes. In assessing the convertible debt instruments, management determines if the convertible debt host instrument is conventional convertible debt and further if there is a beneficial conversion feature requiring measurement. If the instrument is not considered conventional convertible debt under ASC 470, the Company will continue its evaluation process of these instruments as derivative financial instruments under ASC 815.

Once determined, derivative liabilities are adjusted to reflect fair value at each reporting period end, with any increase or decrease in the fair value being recorded in results of operations as an adjustment to fair value of derivatives. At September 30, 2017, the Company effected a change in accounting estimate and

adopted a Monte Carlo simulation model to value outstanding derivative liabilities as of September 30, 2017.

Related Parties

The registrant follows subtopic 850-10 of the FASB Accounting Standards Codification for the identification of related parties and disclosure of related party transactions.

Pursuant to Section 850-10-20 the Related parties include (a) affiliates of the registrant; (b) entities for which investments in their equity securities would be required, absent the election of the fair value option under the Fair Value Option Subsection of Section 825–10–15, to be accounted for by the equity method by the investing entity; (c) trusts for the benefit of employees, such as pension and profit-sharing trusts that are managed by or under the trusteeship of management; (d) principal owners of the registrant; (e) management of the registrant; (f) other parties with which the registrant may deal if one party controls or can significantly influence the management or operating policies of the other to an extent that one of the transacting parties might be prevented from fully pursuing its own separate interests; and (g) Other parties that can significantly influence the management or operating policies of the transacting parties or that have an ownership interest in one of the transacting parties and can significantly influence the other to an extent that one or more of the transacting parties might be prevented from fully pursuing its own separate interests.

The financial statements shall include disclosures of material related party transactions, other than compensation arrangements, expense allowances, and other similar items in the ordinary course of business. However, disclosure of transactions that are eliminated in the preparation of consolidated or combined financial statements is not required in those statements. The disclosures shall include: (a) the nature of the relationship(s) involved; (b) description of the transactions, including transactions to which no amounts or nominal amounts were ascribed, for each of the periods for which income statements are presented, and such other information deemed necessary to an understanding of the effects of the transactions on the financial statements; (c) the dollar amounts of transactions for each of the periods for which income statements are presented and the effects of any change in the method of establishing the terms from that used in the preceding period; and (d) amounts due from or to related parties as of the date of each balance sheet presented and, if not otherwise apparent, the terms and manner of settlement.

EVIO Labs MA - Diversity Plan

Under 935 CMR 500.101(c), applicant is required to have a diversity plan to promote equity among minorities, women, veterans, people with disabilities and people of all gender identities and sexual orientation. That plan is described here.

Our Company is committed to recruiting and retaining a diverse workforce. As part of this effort, our company includes information of its efforts to meet the diversity goal of the Act and the effectiveness of its diversity plan.

Our diversity plan include the following:

1. Representation of diverse participants in the organization's workforce
2. Efforts to reach out to and recruit diverse participants for employment, including for executive and managerial positions
3. Employee retention efforts
4. A list of all contracts entered into or transactions conducted by the organization for goods or services with diverse groups.

We believe that as possible, our Company should be as diverse as the customers that we will serve in order to ensure that all our clientele feel comfortable and supported when working with us. Organizations that promote and achieve a diverse workplace will attract and retain quality employees and increase customer loyalty.

We are committed to creating a workplace and vendor ecosystem that supports a broad definition of diversity, including but not limited to race, gender veterans, service disabled veterans, LGBT identifying individuals, and individuals with disabilities.

Our Company has established a goal of diversity in ownership, management, employment and contracting to ensure that all individuals and groups are accorded equality of opportunity, to the extent available.

Our company's leaders understand that they must support their employees in learning how to effectively interact with and manage people in a diverse workplace. They recognize that they should encourage employees to continue to learn new skills in dealing with and managing people. They also recognize the impact that diverse customers will have upon the success or failure of our dispensary.

Definition of Minority

The company considers a "minority" as that defined by the National Minority Supplier Development Council. A minority group member is an individual who is a U.S. citizen with at least one quarter of the following:

Asian-Indian: A U.S. citizen whose origins are from India, Pakistan and Bangladesh.

Asian-Pacific: A U.S. citizen whose origins are from Japan, China, Indonesia, Malaysia, Taiwan, Korea, Vietnam, Laos, Cambodia, the Philippines, Thailand, Samoa, Guam, the U.S. Trust Territories of the Pacific or the Northern Marianas.

Black: A U.S. citizen who is of African descent.

Hispanic: A U.S. citizen of true-born Hispanic heritage, from any of the Spanish-speaking areas of the following regions: Mexico, Central America, South America and the Caribbean Basin only. Brazilians (Afro-Brazilian, indigenous/Indian only) shall be listed under Hispanic designation for review and certification purposes.

Native American: A person who is an American Indian, Eskimo, Aleut or Native Hawaiian, and regarded as such by the community of which the person claims to be a part. Native Americans must be documented members of a North American tribe, band or otherwise organized group of native people who are indigenous to the continental United States and proof can be provided through a Native American Blood Degree Certificate (i.e., tribal registry letter, tribal roll register number).

Diversity of Company Personnel

EVIO Labs MA, LLC is a small company with a workforce of four employees. We intend to hire staff to reach 11 employees within one year, and ultimately grow to a staff of 16.

At this time, 50% of our staff are female, and 25% are Asian American. As the company grows we will remain committed to developing a diverse workforce.

In addition to gender and race, we will specifically consider diversity goals for the following: veteran status, disability, religious background, sexual orientation, race, and age. The Company considers the collection of such information to be highly sensitive and confidential. In an attempt to reduce potential biases in talent prospecting, employment, and training activities, by the company, reporting of diversity characteristics from employees is entirely voluntary, with the exception of age which is required to ensure legal compliance.

Employment Goals

As the company grows, we will strive to achieve a workforce that is at least 50% female, and maintain a workforce that is at least 25% represented by LGBTQ, racial minorities, and veterans.

2018 - 4 Employees – 2 female, 1 minority
2019 - 11 Employees- 6 female, 3 minority, LGBTQ, veteran, and/or disabled
2020 – 16 Employees – 8 female, 4 minority, LGBTQ, veteran, and/or disabled

Programs

Plan for Diversity-Oriented Outreach and/or Events

To the extent available, the company will seek to recruit employees and contractors from female and minority colleges, look to veterans' groups for available talent, and engage LGBT and minority community support organizations.

To improve recruitment and increase the flow of diverse applicants, the company will disseminate information on job opportunities to organizations representing minorities, women, veterans, and the LGBT community when job opportunities occur and encourage all employees to refer qualified applicants to management regardless of race, gender, sexual orientation, disability, or age; request employment agencies to refer qualified minorities and women.

Recruiting employees from impact communities

EVIO will endeavor to recruit employees from impact communities. For instance we will recruit from specific programs at the following universities:

UMass Lowell – Undergraduate and graduate degrees in Chemistry and Biology
Middlesex Community College – Associates degrees in Biotechnology Technician and Paralegal Studies

We will also recruit by contacting minority student associations at Universities throughout Massachusetts including Northeastern University and the University of Massachusetts.

We will also target industry organizations that have largely minority memberships. These include:

- Minority Cannabis Business Association
- ELEVATE NE

Contracts with Diverse Groups

The company will endeavor to contract with suppliers that are verified Small Diverse Businesses (SDB) or certified minority-owned or women-owned businesses, as available.

We will seek suppliers that have been certified and/or verified from the following organizations:

- Woman's Business Enterprise National Council (WBENC)
- National Minority Supplier Development Council (NMSDC)
- United States Small Business Administration (SBA) 8(a) Program *
- Vets First Verification Program at vetbiz.gov
- US Business Leadership Network (USBLN)
- National Gay & Lesbian Chamber of Commerce (NGLCC)

We intend to work with specific suppliers and will actively seek out bids from diverse suppliers, including those that are minority, woman, veteran, disabled veteran, LGBT, disability-owned suppliers including the following:

- Packaging Supplies: Sigma Supply.
    - A woman-owned business http://www.sigmasupply.com/wbenc/

- Office, Copier and Printing Supplies: Klique Technologies.
    - A minority, woman-owned business http://www.kliquetechnologies.com/

- Security Installation and Services: Top Flight Security, LLC
    - Veteran-owned.

Commitment to Diversity Practices

We intend to retain our employees, including our diverse employees, primarily by making our company a comfortable and welcome place to work for all individuals. We also ensure that while we celebrate and leverage difference, we maintain sensitivity and do not make any individual feel that they're isolated from their peers.

We will encourage inclusion by organizing employee resource and affinity groups— essentially communities within corporations that allow people with similar backgrounds and experiences to connect.

Supporting venues for networking, mentoring, and socializing, such groups increase employee engagement by demonstrating to individuals that people like themselves are not only finding success within the enterprise but are willing to help them succeed as well. With tools like these at their disposal, employees are far more likely to feel part of a diverse and inclusive workforce that champions success for all individuals.

We also make diversity a part of our brand. Our organization is meant to support our local communities, embracing difference and welcoming all. We promote volunteerism among employees and will provide corporate-sponsored initiatives to raise funds and awareness for different causes.

We will invest in diversity by offering internships and scholarships to individuals from underrepresented groups.

Measure of Results

EVIO maintains reports of its workforce diversity through self-identified demographic data. Such reports can be provided to CCC upon request, and as the company grows and/or exhibits employee turnover.

At this time, the four employees who work for EVIO Labs MA, LLC, are 50% female and 25% Asian American.

3.6 Quality Control and Testing Plan

A proposed analytical testing lab located at:

Viridis Analytics, LLC dba EVIO Labs MA
40 Speen St.
Framingham, MA

EVIO Labs MA
40 Speen St.
Framingham, MA

Dear Commissioners:

In support of the application for the cannabis testing laboratory license application, please accept the following request that certain privileged documents and information contained within the application be withheld from public disclosure which protects certain copyrighted and trade secrets materials.

The purpose of this privilege is to protect secret information that is essential to the continued operation of a business or industry and may be afforded some measures of protection against disclosure.

It is our belief that certain materials contained within the license application including but not limited to; the Standard Operating Procedures and Operating Plans for the operation of this testing facility are protected as privileged information and shall not be disclosed to the public.

Please feel free to contact our office with any additional questions.

Kind Regards,

Lori Glauser, COO
EVIO, Inc.

The EVIO Labs Quality Policies

EVIO Labs maintains a Quality Manual and associated policies that enforce the Laboratory's objective to produce technically defensible laboratory test results that accurately and precisely describe the sample for the purpose of reporting to the client. The Laboratory is committed to routinely performing laboratory work in conformance to ISO 17025 and the TNI Standard (2003 and 2009), resulting in the overall improvement in laboratory quality over time. Demonstration of the laboratory's commitment to reach its objective will result in the following

- Adequately staffed and equipped laboratory facilities,
- Successful participation in the proficiency testing program operated by an accredited provider,
- Successful implementation of an ISO 17025 compliant quality system
- Annual internal audits with management review,
- Successful biennial assessments by the Accreditation Program,
- Timely reporting of laboratory test results to appropriate regulating authorities/clients,
- Laboratory test results that are supported by quality control data and documented laboratory testing procedures.
- Continual improvement of the quality system through program monitoring and assessment

The quality policy is communicated to employees during the training of new hires. It is understood, implemented, and maintained by employees at all levels. This is documented by management through the employee evaluation process, the training procedure, the internal audit process, and the document control process. The technical director shall ensure that the lab's policies and objectives for quality of testing services are documented in the Quality Manual. The technical director shall assure that the Quality Manual is communicated to, understood, and implemented by all personnel concerned. Documentation includes signed statements in each analyst's training file.

Quality System

The quality system defined in the quality manual applies to all personnel who perform activities affecting quality. All employees are responsible for the quality system. The quality system applies to all activities affecting data realization whether at permanent facilities, sites away from permanent facilities, or any mobile or temporary facilities.

Through a formal documented system of planned activities, the quality system meets the relevant requirements of ISO guide 17025. EVIO also goes above and beyond the ISO requirements by implementing requirements from the NELAC TNI 2009 Standard for Laboratories. The quality manual is maintained current and up-to-date by the Quality Manager (QAO) to reflect changes to the system. The laboratory defines it policy for each applicable standard element in the quality manual. For each element, as appropriate, the laboratory has documented procedures that further describe how the specific policy objectives and goals are met. The quality manual references these documented procedures. Where applicable, work instructions are referenced in the documented procedures and the quality manual.

Quality procedures and instructions are implemented as written. The procedures explain how the laboratory implements the standard requirements in accordance with its quality policy. They are revised, as necessary, to reflect the actual objectives, flow of tasks, and staff responsibilities.

Work instructions are maintained in the laboratory methods manual. They specify the equipment, resources and skills required, what tests and verifications will be performed to measure process and product quality, the records and written documentation used by personnel, and standards of acceptability. Work instructions are approved by the affected managerial staff and are maintained in the document control system

The EVIO Labs "Playbook" and Standard Operating Procedures

EVIO Labs has developed a guide to EVIO Labs operations that we call our "Playbook". This is a governing document that includes reference to our extensive set of policies and operating procedures. The policies, procedures, and training materials below have been implemented in all our labs, and have been prepared to be compliant to ISO 17025 and TNI 2009.

Document Name

2018 Employee Handbook -California, Massachusetts, Nevada, And Oregon
Data Integrity And Ethics Training PowerPoint
EVIO MA Organizational Chart
EVIO.100.010 EVIO Labs Playbook
MA Price Sheet 2018 V2
ORELAP-SOP-001 Protocol for Collecting Samples of Usable Marijuana
ORELAP-SOP-002 Protocol for Collecting Samples of Cannabinoid Concentrates, Extracts, and Products
Personal Security And Crime Prevention Training
POL.100.010 Client Data Privacy Policy
POL.100.020 Maintaining Client Confidentiality
POL.200.010 Sample Acceptance Policy
POL.300.010 Electronic Signature Policy
POL.400.010 Ethics Policy and Code of Conduct
POL.500.010 Laboratory Safety Training Manual
POL.600.010 Internal Research Policy
POL.S.90.010 Accounts Receivable Collection
SOP.H.30.010 Project Management Procedures
SOP.M.10.010 Lab Opening Procedures
SOP.M.10.011 Video Surveillance Setup And Operation
SOP.M.10.020 Prevention Of Laboratory Cross Contamination
SOP.M.10.030 Cleaning Labware
SOP.M.10.040 Operation Of Bottletop Dispenser
SOP.M.10.050 Operation And Maintenance Of Fume Hoods
SOP.M.10.060 Operation Of Scale
SOP.M.10.070 Operation Of Restek Centrifuge
SOP.M.10.070 Unannounced Inspections
SOP.M.10.080 Method For Odor Containment
SOP.M.20.010 Approval Of Vendors
SOP.M.20.020 Ordering And Receiving Supplies
SOP.M.20.030 Receipt And Storage Of Equipment And Supplies
SOP.M.30.001 Support Equipment

SOP.M.30.010 Changing The Gc Column
SOP.M.30.020 HPLC Maintenance
SOP.M.30.021 Operation And Calibration Of Hp 1050 Hplc Dad
SOP.M.30.030 Operation And Calibration Of Micropipettors
SOP.M.50.010 Traceability Of Samples, Reagents, Standards And Supplies
SOP.M.50.011.DEN Autoclave Use And Maintenence
SOP.M.50.011.MAS Autoclaving
SOP.M.50.020 Use Of Secondary Containers
SOP.M.50.080 General Waste Disposal Procedures
SOP.M.70.010 Security Procedures
SOP.QA.100.010 Corrective And Preventive Actions
SOP.QA.40.001 Document and Record Control Procedures
SOP.QA.400.010 Writing An SOP
SOP.QA.400.020 Use Of Laboratory Notebooks
SOP.QA.400.060 PowerDMS
SOP.QA.500.010 Data Integrity Management
SOP.QA.500.010 Data Integrity Procedure
SOP.QA.600 Management Review
SOP.QA.700 Nonconforming Work
SOP.S.10.010 Marketing Communications Procedures
SOP.S.20.021.MA Massachusetts FAQs
SOP.S.90.010 Accounts Receivable Collection
SOP.T.00.000 SOP Template
SOP.T.01.001 Promium Element LIMS Procedures
SOP.T.01.001.MAS EVMA LIMS Procedures
SOP.T.10.020 Sample Intake Procedures
SOP.T.20.010 Procedures For Sampling
SOP.T.20.011 Procedure For Sampling Industrial Hemp
SOP.T.20.020 Sample Handling Storage And Preservation
SOP.T.20.020.MAS Sample Handling, Storage, And Preservation
SOP.T.20.021 Laboratory Sample Tracking
SOP.T.20.022 Basic METRC Procedures
SOP.T.30.010 Photographing Samples
SOP.T.30.011.MAS PCR - DNA Extraction For Qpcr
SOP.T.30.012.MAS qPCR For Microbial Contaminant Testing
SOP.T.30.020 Homogenization Of Cannabis Samples
SOP.T.30.030 Sample Weighing Procedures
SOP.T.30.040 Sample Drying
SOP.T.30.050 Sample Preparation for Cannabinoid Quantification via High Pressure Liquid Chromatography
SOP.T.30.051 Unique Matrix Validation Procedures
SOP.T.30.052.MAS Sample Preparation For Heavy Metals Analysis Via Icp-Ms.Pdf
Sop.T.30.052.Sbh Sample Preparation For Heavy Metals Analysis Via Icp-Ms.Pdf (2)

SOP.T.30.060 Pesticide Analysis Preparation For Cannabis And Cannabinoid Extracts And Concentrates (Repaired)
SOP.T.30.061 Quechers Pesticide Analysis Preparation (Krl)
SOP.T.40.001 Assessment For Effectiveness W Key
SOP.T.40.010 Moisture Content via Loss on Drying
SOP.T.40.011 Water Activity Measurement Procedures
SOP.T.40.013 Filth And Foreign Material Inspection
SOP.T.40.020 Cannabinoid Quantitation via High Pressure Liquid Chromatography
SOP.T.40.022 Hplc Water And Mobile Phase Prep
SOP.T.40.023 Cannabinoids via HPLC (Acetonitrile)
SOP.T.40.023.MAS Cannabinoids Analysis Via HPLC
SOP.T.40.026 QC Material Preparation and Characterization
SOP.T.40.027 Cannabinoid LCS-LCS Duplicate Procedures
SOP.T.40.030 Residual Solvent Analysis via GCFID
SOP.T.40.031 Residual Solvents via HS-GC-MS
SOP.T.40.040 Rapid Yeast And Mold
SOP.T.40.040.MAS Rapid Yeast and Mold
SOP.T.40.041 E. Coli And Coliforms Enumeration via Petrifilm
SOP.T.40.042 Salmonella Presence Determination Via 3M Express System
SOP.T.40.043 PCR Microbiological Pathogen Screening Via Real-Time PCR
SOP.T.40.050 Pesticide Analysis via Shimadzu GCMS-TQ8040
SOP.T.40.051 Pesticides Analysis via LC-MSMS
SOP.T.40.051.MAS Enterobacteriaceae
SOP.T.40.052.MAS Rapid Coliform
SOP.T.40.053.MAS Aerobic Count
SOP.T.40.080.MAS Ochratoxin A Testing
SOP.T.40.090 Terpenoid Analysis via HS-GC-FID And HS-GC-MS
SOP.T.40.090.MAS Aflatoxin Testing With Aflacheck
SOP.T.40.100 General Procedures For Handling Subcontracted Analyses
SOP.T.40.50.MAS Heavy Metals Analysis Via ICP-MS
Sop.T.40.50.Sbh Heavy Metals Analysis Via Icp-Ms
SOP.T.80.020 Estimating Uncertainty
SOP.T.80.021Use Of Control Charts For QC Monitoring
SOP.T.90.010 Data Review and Reporting
SOP.T.90.010.Sbh Data Review And Reporting
SOP_Reporting End Of Quarter WIP from LIMS
TNI And ISO Requirements

Testing Laboratories - Statement of Purpose, Problem, Rationale and Benefits

The Bureau of Cannabis Control makes clear that the protection of the public is paramount. In keeping with that, the bureau developed procedures for ensuring that all medical cannabis goods are tested

prior to delivery to a dispensary for retail sale. All cannabis goods be tested by testing laboratories licensed by the bureau for a variety of attributes for the protection of the public. Through the proposed testing Bureau of Cannabis Control, Testing Laboratories Initial Statement of Reasons laboratory regulations, the bureau aims to ensure the medical cannabis goods offered for sale are safe for human consumption. The bureau also aims to ensure medical cannabis patients receive accurate information regarding the medical cannabis goods they consume. First, the MCRSA requires the bureau, with assistance from the CDPH, to develop health protective levels for moisture content, contaminants, residual solvents, microbiological impurities, and foreign material. Consumable medical cannabis goods are at risk of contamination similar to other consumable products. Contamination may occur during various stages of the cultivation, harvest, extraction, processing, and packaging processes. Some of the types of contamination that can make a medical cannabis good unsafe involves pesticides, residual solvents and processing chemicals, microbiological impurities, heavy metals, and foreign material. These proposed regulations aim to set forth action levels that the bureau considers are both protective of public health and achievable by industry. The proposed exposure limits are necessary to ensure, to the extent feasible, that no medical cannabis patient will suffer material impairment of health from exposure to contaminants in medical cannabis goods. As such, these contaminants are discussed in greater detail:

- Chemicals, Microbiological impurities, Mycotoxins, Foreign Materials & Heavy Metals

Sampling

Proper sampling collection may be far more consequential than laboratory measurement errors. If a sample of something is improperly obtained, the measurement data that is gathered through analyzing the sample puts the measurement data it produces into question. Proper sampling is therefore critical to obtaining relevant and valid data.

In these regulations, the Bureau proposes fairly detailed minimum sampling requirements. These requirements include what must go into a testing laboratory's sampling protocol, training requirements for laboratory agents who will be obtaining samples ("samplers"), and how samples are to be stored. The proposed sampling regulations also make specific the MCRSA provision that requires the laboratory agent collecting the sample to use a "statistically valid sampling method." A statically valid sampling method is necessary to ensure that the medical cannabis goods samples accurately and precisely represent the characteristics of the batches from which they were taken.

Method Validation

An analytical procedure is developed to test a defined characteristic of a substance against established acceptance criteria for that characteristic. This is called a "method," or a "test." To ensure the method used results in reliable, valid data, the method must be "validated" before it is used to produce usable results. Method validation is a process by which a method is tested to ensure it is producing valid results.

Because it is only fairly recently that cannabis has been a substance that is tested for impurities by laboratories, and because the federal government does not regulate this industry, there are few

validated methods for the testing of cannabis. Therefore laboratories will have to validate their own methods for the testing of medical cannabis.

The laboratory's analytical instrumentation and methodology is selected based on the intended purpose and scope of the analytical method. Parameters that may be evaluated during method development are specificity, linearity, limits of detection (LODs) and limits of quantitation (LOQs), range, accuracy, and precision.

These proposed regulations set out what the bureau considers to be acceptable ways to validate a "nonstandard" method, which will be used for testing medical cannabis goods. In developing these proposed method-validation regulations, the bureau looked to guidelines and other resources used in other industries.

Quality Assurance

Quality assurance is a set of operating principles that enable laboratories to produce defensible data of known accuracy and precision. These operating principles form a laboratory quality system and are documented in a laboratory's quality-assurance manual. These regulations propose the minimum components of a quality-assurance program and what must be contained in the quality-assurance manual.

The Bureau's proposed quality-assurance program includes requirements for quality control samples. The bureau proposes to require the use of method blank samples, field duplicate samples, and matrix spike samples (or laboratory control samples). The proposed regulations also set out how to calculate the limit of detection and limit of quantitation. They also spell out recordkeeping requirements and require an annual internal audit. Together these proposed regulations will assist in providing accurate testing and guidance for how to ensure accurate testing.

The Bureau is also proposing required proficiency testing. Proficiency testing is a blind testing of a laboratory's ability to perform analyses. The bureau proposes requiring testing laboratory licensees participate in a proficiency testing carried out by an ISO 17025 accredited laboratory so that every analyst and every method used by the laboratory is eventually tested. This is an important check on the ability of laboratories to provide accurate data.

Personnel

The education and experience level of the personnel of a testing laboratory is very important. Many of the required tests in these proposed regulations are complex and must be done by persons with specialized training. Therefore, the bureau proposes in these regulations to require testing laboratories licensed by the bureau to have a laboratory director. It is also proposed that analysts and supervisory analysts meet some minimum qualifications. This is done to ensure laboratories are run by competent and trained persons, to ensure accurate testing, and to ensure public safety.

Applicable Rulemaking - Testing Laboratories:

500.160: Testing of Marijuana and Marijuana Products

(1) No marijuana product, including marijuana, may be sold or otherwise marketed for adult use that is not capable of being tested by Independent Testing Laboratories, except as allowed under 935 CMR 500.000. Testing of marijuana products shall be performed by an Independent Testing Laboratory in compliance with the Protocol for Sampling and Analysis of Finished Medical Marijuana Products and Marijuana-infused Products, as amended in November, 2016, published by the DPH. Testing of environmental media (e.g., soils, solid growing media, and water) shall be performed in compliance with the Protocol for Sampling and Analysis of Environmental Media for Massachusetts Registered Medical Marijuana Dispensaries published by the DPH.

(2) A Marijuana Establishment shall have a written policy for responding to laboratory results that indicate contaminant levels are above acceptable limits established in the DPH protocols identified in 935 CMR 500.160(1). Any such policy shall include notifying the Commission within 72 hours of any laboratory testing results indicating that the contamination cannot be remediated and disposing of the production batch. The notification must be from both the Marijuana Establishment and the Independent Testing Laboratory, separately and directly. The notification from the Marijuana Establishment must describe a proposed plan of action for both the destruction of the contaminated product and the assessment of the source of contamination.

(3) A Marijuana Establishment shall maintain the results of all testing for no less than one year;

(4) The sale of seeds is not subject to these testing provisions.

(5) Clones are subject to these testing provisions, but are exempt from testing for metals.

(6) All transportation of marijuana to and from Independent Testing Laboratories providing marijuana testing services shall comply with 935 CMR 500.105(13).

(7) All storage of marijuana at a laboratory providing marijuana testing services shall comply with 935 CMR 500.105(11); 935 CMR: CANNABIS CONTROL COMMISSION 500.160: continued

(8) All excess marijuana must be disposed in compliance with 935 CMR 500.105(12), either by the Independent Testing Laboratory returning excess marijuana to the source Marijuana Establishment for disposal or by the Independent Testing Laboratory disposing of it directly; and

(9) No marijuana product shall be sold or otherwise marketed for adult use that has not first been tested by an Independent Testing Laboratory and deemed to comply with the standards required under 935 CMR 500.160.

Sanitation Requirements

Staff

All marijuana establishment agents working in direct contact with preparation of marijuana product samples shall conform to sanitary practices while on duty, including:

a. Maintaining adequate personal cleanliness; and
b. Washing hands thoroughly in an adequate hand-washing area before starting work, and at any other time when hands may have become soiled or contaminated.

Hand-washing facilities shall be adequate and convenient and shall be furnished with running water at a suitable temperature. Hand-washing facilities shall be located in the Marijuana Establishment in testing areas and where good sanitary practices require employees to wash and sanitize their hands, and shall provide effective hand-cleaning and sanitizing preparations and sanitary towel service or suitable drying devices;

Facilities

There shall be sufficient space for placement of equipment and storage of materials as is necessary for the maintenance of sanitary operations;

Waste shall be properly removed, disposed of so as to minimize the development of odor and minimize the potential for the waste attracting and harboring pests nightly and removed by the buildings' facility staff.

Floors, walls, and ceilings shall be constructed in such a manner that they may be adequately kept clean and in good repair. Buildings, fixtures, and other physical facilities shall be maintained in a sanitary condition.

There shall be adequate safety lighting in all testing and storage areas, as well as areas where equipment or utensils are cleaned.

EVIO shall provide its employees with adequate, readily accessible toilet facilities that are maintained in a sanitary condition and in good repair.

All contact surfaces, including utensils and equipment, shall be maintained in a clean and sanitary condition, in accordance with ISo 17025:2017 requirements. Such surfaces shall be cleaned and sanitized as frequently as necessary to protect against contamination, using a sanitizing agent registered by the US Environmental Protection Agency (EPA), in accordance with labeled instructions. Equipment and utensils shall be so designed and of such material and workmanship as to be adequately cleanable.

All toxic items shall be identified, held, and stored in a manner that protects against contamination of marijuana samples, and in compliance fire and chemical safety standards and within ISO 17025:2017 requirements.

A Marijuana Establishment's water supply shall be sufficient for necessary operations. Plumbing shall be of adequate size and design, and adequately installed and maintained to carry sufficient quantities of water to required locations throughout the Marijuana Establishment. Plumbing shall properly convey sewage and liquid disposable waste from the Marijuana Establishment. There shall be no cross-connections between the potable and wastewater lines;

Applicable Rulemaking

(c) All Marijuana Establishments, including those that develop or process edible marijuana products, shall comply with sanitary requirements. All edible products shall be prepared, handled, and stored in compliance with the sanitation requirements in 105 CMR 590.000: Minimum Sanitation Standards for Food Establishments.

(3) Requirements for the Handling of Marijuana.

(a) A Marijuana Establishment authorized to process marijuana shall do so in a safe and sanitary manner. A Marijuana Establishment shall process the leaves and flowers of the female marijuana plant only, which shall be:

1. Well cured and generally free of seeds and stems;
2. Free of dirt, sand, debris, and other foreign matter;
3. Free of contamination by mold, rot, other fungus, and bacterial diseases;
4. Prepared and handled on food-grade stainless steel tables; and
5. Packaged in a secure area.

(b) All Marijuana Establishments, including those that develop or process non-edible marijuana products, shall comply with the following sanitary requirements:

1. Any marijuana establishment agent whose job includes contact with marijuana or nonedible marijuana products, including cultivation, production, or packaging, is subject to the requirements for food handlers specified in 105 CMR 300.000: Reportable Diseases, Surveillance, and Isolation and Quarantine Requirements;
2. Any marijuana establishment agent working in direct contact with preparation of marijuana or nonedible marijuana products shall conform to sanitary practices while on duty, including:

a. Maintaining adequate personal cleanliness; and
b. Washing hands thoroughly in an adequate hand-washing area before starting work, and at any other time when hands may have become soiled or contaminated.

3. Hand-washing facilities shall be adequate and convenient and shall be furnished with running water at a suitable temperature. Hand-washing facilities shall be located in the Marijuana Establishment in production areas and where good sanitary practices require employees to wash and sanitize their hands, and shall provide effective hand-cleaning and sanitizing preparations and sanitary towel service or suitable drying devices;

4. There shall be sufficient space for placement of equipment and storage of materials as is necessary for the maintenance of sanitary operations;
5. Litter and waste shall be properly removed, disposed of so as to minimize the development of odor and minimize the potential for the waste attracting and harboring pests. The operating systems for waste disposal shall be maintained in an adequate manner pursuant to 935 CMR 500.105(12);
6. Floors, walls, and ceilings shall be constructed in such a manner that they may be adequately kept clean and in good repair;
7. There shall be adequate safety lighting in all processing and storage areas, as well as areas where equipment or utensils are cleaned;
8. Buildings, fixtures, and other physical facilities shall be maintained in a sanitary condition;
9. All contact surfaces, including utensils and equipment, shall be maintained in a clean and sanitary condition. Such surfaces shall be cleaned and sanitized as frequently as necessary to protect against contamination, using a sanitizing agent registered by the US Environmental Protection Agency (EPA), in accordance with labeled instructions. Equipment and utensils shall be so designed and of such material and workmanship as to be adequately cleanable;
10. All toxic items shall be identified, held, and stored in a manner that protects against contamination of marijuana products;
11. A Marijuana Establishment's water supply shall be sufficient for necessary operations. Any private water source shall be capable of providing a safe, potable, and adequate supply of water to meet the Marijuana Establishment's needs;
12. Plumbing shall be of adequate size and design, and adequately installed and maintained to carry sufficient quantities of water to required locations throughout the Marijuana Establishment. Plumbing shall properly convey sewage and liquid disposable waste from the Marijuana Establishment. There shall be no cross-connections between the potable and waste water lines;
13. A Marijuana Establishment shall provide its employees with adequate, readily accessible toilet facilities that are maintained in a sanitary condition and in good repair;
14. Products that can support the rapid growth of undesirable microorganisms shall be held in a manner that prevents the growth of these microorganisms; and
15. Storage and transportation of finished products shall be under conditions that will protect them against physical, chemical, and microbial contamination as well as against deterioration of finished products or their containers.
16. All vehicles and transportation equipment used in the transportation of marijuana products or edibles requiring temperature control for safety must be designed, maintained, and equipped as necessary to provide adequate temperature control to prevent the marijuana products or edibles from becoming unsafe during transportation, consistent with applicable requirements pursuant to 21 CFR 1.908(c).

(c) All Marijuana Establishments, including those that develop or process edible marijuana products, shall comply with sanitary requirements. All edible products shall be prepared, handled, and stored in compliance with the sanitation requirements in 105 CMR 590.000: Minimum Sanitation Standards for Food Establishments.

Record Keeping Plan

A proposed analytical testing lab located at:

Viridis Analytics, LLC dba EVIO Labs MA
40 Speen St.
Framingham, MA

EVIO Labs MA
40 Speen St.
Framingham, MA

Dear Commissioners:

In support of the application for the cannabis testing laboratory license application, please accept the following request that certain privileged documents and information contained within the application be withheld from public disclosure which protects certain copyrighted and trade secrets materials.

The purpose of this privilege is to protect secret information that is essential to the continued operation of a business or industry and may be afforded some measures of protection against disclosure.

It is our belief that certain materials contained within the license application including but not limited to; the Standard Operating Procedures and Operating Plans for the operation of this testing facility are protected as privileged information and shall not be disclosed to the public.

Please feel free to contact our office with any additional questions.

Kind Regards,

Lori Glauser, COO
EVIO, Inc.

Record Keeping

EVIO LAbs MA will maintain records in accordance with 935 CMR 500.105(9). EVIO has a number of systems in place to manage and maintain records.

Standard Operating Procedures

The company maintains controlled Standard Operating Procedures, as described previously. Our document control system, PowerDMS allows for controlled access, version control and rollback, document approvals, scheduled trainings and signature acknowledgements, obsolete document archival, and compliance assessment capabilities.

Financial Records

As a publicly traded company, EVIO and its subsidiaries are subject to stringent accounting, financial recordkeeping, auditing, and data retention rules, as well as at least quarterly public filings of our financial results. The company maintains its books in a secure accounting system (Intacct by Sage Analytics). The system is secured through role-based access and authentication, and our financial data is audited on a quarterly basis, and financial data is stored for a minimum of 7 years. Financial records include all assets and liabilities, monetary transactions, books of accounts including journals, ledgers, and supporting documents, agreements, checks, invoices, and vouchers, and sales records including the quantity, form, and cost of services provided and salaries, wages, and stipends paid to employees, board members and contractors. .

Seed to Sale Tracking

All marijuana products will be tracked in the state-assigned seed to sale tracking system, (i.e. METRC). Corporate SOPs and Metrc training manuals are maintained in PowerDMS and assigned for staff training. All cannabis samples coming to the lab, and all samples leaving the lab - typically as waste product - shall be tracked in METRC to ensure accurate on site inventory of cannabis product at all times. The cannabis inventory may be reviewed by authorized personnel and the Commission.

Personnel Records

EVIO maintains personnel records in an HR system called BambooHR. This system provides a sharable platform that stores information about each employee such as job function, hire date, periodic performance evaluations, supervision, time off requests, etc. BambooHR also maintains our personnel policies and procedures such as our Employee Manual and maintains records of completion.
EVIO maintains job descriptions within BambooHR and our HR department, and organizational chart is maintained in our Quality Manual and among our executive records.
Records of employee training including responsible vendor training and eight-hour related duty training are maintained in PowerDMS
Our HR department maintains confidential personnel files that include all sensitive information including documentation and verification of references, background checks, records of disciplinary action, and salaries, wages and stipends paid to all employees, board members and contractors. .

Maintenance of Records after Closure
Should the lab close, all records must be kept for at least two years at the expense of the Marijuana Establishment and in a form and location acceptable to the Commission.

Applicable Rulemaking

(9) Record Keeping. Records of a Marijuana Establishment must be available for inspection by the Commission, upon request. The records of a Marijuana Establishment shall be maintained in accordance with generally accepted accounting principles. Written records that are required and are subject to inspection include, but are not necessarily limited to, all records required in any section of 935 CMR 500.000, in addition to the following:

(a) Written operating procedures as required by 935 CMR 500.105(1);
(b) Inventory records as required by 935 CMR 500.105(8);
(c) Seed-to-sale tracking records for all marijuana products as required by 935 CMR 500.105(8)(e);
(d) The following personnel records:

1. Job descriptions for each employee and volunteer position, as well as organizational charts consistent with the job descriptions;
2. A personnel record for each marijuana establishment agent. Such records shall be maintained for at least 12 months after termination of the individual's affiliation with the Marijuana Establishment and shall include, at a minimum, the following:

a. all materials submitted to the Commission pursuant to 935 CMR 500.030(2);
b. documentation of verification of references;
c. the job description or employment contract that includes duties, authority, responsibilities, qualifications, and supervision
d. documentation of all required training, including training regarding privacy and confidentiality requirements, and the signed statement of the individual indicating the date, time, and place he or she received said training and the topics discussed, including the name and title of presenters;
e. documentation of periodic performance evaluations;
f. a record of any disciplinary action taken; and g. notice of completed responsible vendor and eight-hour related duty training.

3. A staffing plan that will demonstrate accessible business hours and safe cultivation conditions;

4. Personnel policies and procedures; and

5. All background check reports obtained in accordance with 935 CMR 500.030. (e) Business records, which shall include manual or computerized records of:

1. Assets and liabilities;
2. Monetary transactions;

3. Books of accounts, which shall include journals, ledgers, and supporting documents, agreements, checks, invoices, and vouchers;
4. Sales records including the quantity, form, and cost of marijuana products; and
5. Salary and wages paid to each employee, stipend paid to each board member, and any executive compensation, bonus, benefit, or item of value paid to any individual affiliated with a Marijuana Establishment, including members of the nonprofit corporation, if any.

(f) Waste disposal records as required under 935 CMR 500.105(12); and

(g) Following closure of a Marijuana Establishment, all records must be kept for at least two years at the expense of the Marijuana Establishment and in a form and location acceptable to the Commission.

Staffing and Training Plan

A proposed analytical testing lab located at:

Viridis Analytics, LLC dba EVIO Labs MA
40 Speen St.
Framingham, MA

EVIO Labs MA
40 Speen St.
Framingham, MA

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It is our belief that certain materials contained within the license application including but not limited to; the Standard Operating Procedures and Operating Plans for the operation of this testing facility are protected as privileged information and shall not be disclosed to the public.

Please feel free to contact our office with any additional questions.

Kind Regards,

Lori Glauser, COO
EVIO, Inc.

The EVIO Staffing Plan

EVIO, Inc. was founded in August, 2014, by Lori Glauser and William Waldrop. In 2017, EVIO acquired Viridis Analytics, LLC, which is now dba EVIO Labs MA.

The lab currently employs four people with shared roles. At this time, the lab employs a Laboratory Director who is responsible for the production of lab results and coordinate activities with laboratory technicians. The lab also employs one analyst, one technician, and one person responsible for sales and administration. The lab director reports to EVIO's VP of operations who works remotely for EVIO Corporate. He reports to Lori Glauser and William Waldrop

We anticipate the lab will increase staff to 11 within one year and up to 16 in two years. The staff will include additional analysts, technicians, samplers, quality assurance, and account managers, and administrative personnel.

Regular business hours are Monday - Friday 9 am - 6 pm. cali

EVIO enforces alcohol, smoke, and drug-free workplace as described in the Employee Handbook.

Staffing records are maintained in accordance with 935 CMR 500.105(9).

Applicable Rulemaking:

EVIO maintains the following personnel records:

1. Job descriptions for each employee and volunteer position, as well as organizational charts consistent with the job descriptions;

2. A personnel record for each marijuana establishment agent. Such records shall be maintained for at least 12 months after termination of the individual's affiliation with the Marijuana Establishment and shall include, at a minimum, the following:

a. all materials submitted to the Commission pursuant to 935 CMR 500.030(2);

b. documentation of verification of references;

c. the job description or employment contract that includes duties, authority, responsibilities, qualifications, and supervision

d. documentation of all required training, including training regarding privacy and confidentiality requirements, and the signed statement of the individual indicating the date, time, and place he or she received said training and the topics discussed, including the name and title of presenters;

e. documentation of periodic performance evaluations;

f. a record of any disciplinary action taken; and

g. notice of completed responsible vendor and eight-hour related duty training.

Qualifications and Training of Staff

EVIO Staff are trained upon hire. Our training program is tailored to each position, the qualifications of each are described below.

EVIOs training program comprises the following elements:

1. Onboarding training, to familiarize employee with the Employee Handbook, general corporate policies and procedures, ethics training, data integrity training, and sensitivity/sexual harassment and inclusion training.
2. General laboratory training, which includes an overview of laboratory procedures, document control, state and local laws and regulations, and quality standards and requirements.
3. Job specific training, which includes methods and use of instruments, analytical procedures, and job-specific standard operating procedures.

Our trainings involve a combination of one on one training, self-directed training, online courses and assessments, classroom/group training and seminars. Training logs are maintained, and assessments including online quizzes, supervisor/trainer assessments, demonstrations of capability are administered to demonstrate skill and compliance.

The job descriptions of the day to day lab staff are below:

Laboratory Director

Job purpose

The Laboratory Director is responsible for overseeing the technical operations of one or more of our labs, and ensuring the production of accurate and timely test results to our customers.

The Lab Director will apply his or her experience working with gas and liquid chromatography, microbiological analysis, and other chemistry methods to perform required tests and implement and enforce EVIO's standard operating procedures. The lab director will meet regulatory, customer and quality system requirements.

Advises subordinates to meet schedules and/or resolve technical problems. Interacts with peer labs and coordinates the program activities with responsibility for results in terms of costs, methods, and employees. Implements and improves quality management programs and procedures.

Lab directors who excel in their position may be promoted to regional lab director, or to executive management.

Duties and responsibilities

- Ensure that test orders are completed in an accurate and in a timely manner
- With guidance from VP of Operations, oversee and direct the technical personnel and scientific methods of the laboratory.
- Provide guidance as requested regarding hiring, training, promotions, and disciplinary issues for technical personnel.
- Ensure that the testing laboratory achieves, maintains, and improves as needed quality standards and appropriate laboratory accreditation.
- Provide consulting services as appropriate
- Develop analytical methods for chemistry-based, genetic, and microbiological assays

· Ensure that personnel are properly trained in quality procedures, operating procedures (SOP's) and equipment specific requirements.
· Compile and prepare reports and analyses setting forth progress, adverse trends, and appropriate recommendations or conclusions as requested by executive management.
· Maintain equipment and supply inventory, recommend purchases.
· Assist in formulating and implementing the short and long-range goals for laboratory; set priorities, assign responsibilities, and establish timetables. Project future needs and formulate strategies consistent with projections.
· Plan and schedule work for the group to ensure proper distribution of assignments as well as adequate manning, space, and facilities for subsequent performance of duties.
· Represent the laboratory in technical interactions with the customer base and partner labs.

- Consult with clients and government regulators
- Coordinate with customer service team to proactively respond to customer complaints and inquiries
- Implement solutions to quality problems through inspections, investigations, and audits
- Maintain quality checks on safety of laboratories, including biohazards and insure appropriate maintenance of the facilities.
- Coordinate the functions and operations of the laboratories with peer laboratories.
- Encourage project/process designs that simplify compliance with quality requirements
- Comply with record keeping requirements
- Perform other related duties incidental to the work described herein.

The above statements describe the general nature and level of work being performed. This is not intended to be an exhaustive list of all responsibilities and duties.

Qualifications

- Technical competence in analytical chemistry or microbiology
- HPLC experience preferred· GC experience preferred· MS experience preferred· Headspace sampling experience preferred
- Microbiological experience (plating, e.coli, salmonella) preferred
- Experience in evaluating instrumentation a plus
- Excellent verbal and written communication skills including technical writing· Detail-oriented
- Experience in computer database and Microsoft Office applications

- Ability to provide excellent customer service, manage others, and collaborate with remote lab personnel
- Ability to work independently under remote supervision.

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Should have bachelor's degree in the chemical, environmental, biological sciences, physical sciences or engineering, with at least twenty-four college semester credit hours in chemistry and at least two years of experience in the environmental analysis of representative inorganic and organic analytes for which the laboratory seeks or maintains accreditation.

Technical Director of Chemistry

- Prepare samples for analysis in accordance with EVIO SOPs
- Perform analysis of samples for potency, pesticide residues, residual solvents, and/or heavy metals, in accordance with state testing rules.
- Provide day to day oversight of lab operations.
- Perform Post-intake Sample Management:
- Monitor samples from intake through retention and disposal.
- Oversee subsampling tasks and check that it is being performed properly.
- Continuously improve analysis and reporting functions
- Perform data review, analysis, and reporting

Technical Director of Microbiology

- Prepare samples for analysis for mold, yeast, mildew, e. coli, salmonella, mycotoxins, or other microbiological contaminants, in accordance with EVIO SOPs and state testing rules.
- Provide day to day oversight of microbiological lab operations.
- Perform Post-intake Sample Management:
- Monitor samples from intake through retention and disposal.
- Oversee subsampling tasks and check that it is being performed properly.
- Continuously improve analysis and reporting functions
- Perform data review, analysis, and reporting

Any technical manager engaged in microbiological or biological analysis shall be a person with a bachelor's degree in microbiology, biology, chemistry, environmental sciences, physical sciences or engineering with a minimum of sixteen college semester credit hours in general microbiology and biology and at least two years of experience in the environmental analysis of representative analytes for which the laboratory seeks or maintains accreditation.

A master's or doctoral degree in one of the above disciplines may be substituted for one year of experience.

A person with an associate's degree in an appropriate field of the sciences or applied sciences, with a minimum of four college semester credit hours in general microbiology may be the technical

manager(s) of a laboratory engaged in microbiological analysis limited to fecal coliform, total coliform, E. coli, and standard plate count. Two years of equivalent and successful college education, including the microbiology requirement, may be substituted for the associate's degree. In addition, each person shall have one year of experience in microbiological analyses.

Laboratory Technician

Job purpose

Reporting to the Laboratory Director, Laboratory Testing Technicians prepare samples of plant, concentrate, and edible products for analysis. Lab work involves measuring and tracking samples, preparing sample dilutions, completing logs, maintaining hygienic lab conditions including washing labware. Technicians may also be required to interpret analytical data, prepare and review reports, work with the Laboratory Director to perform experiments and method validations. The lab technician will use software systems including Laboratory Information Management Systems (LIMS), as well as office tools.

Duties and responsibilities

Sample Intake:

- Receive samples and confirm appropriate receipt conditions
- Enter the samples into the LIMS
- Complete all necessary intake documentation

Sample Preparation for Analysis:

- The technician prepares samples in accordance with the associated method SOPs. The following are tasks necessary for sample preparation:
  - Homogenizations
  - Weighing
  - Extractions
  - Dilutions

Daily Opening Procedures:

- Temperature logs for refrigerators, freezers, and incubators (as applicable)
- Scale calibration verifications
- Stocking consumables
- Cleaning labware
- General tidiness throughout the lab space

For more advanced technicians, the following may be included in their daily tasks:

- Sample Analysis using HPLC, GC, GC/MS, etc.
- Sample Reporting
- Manage inventory and ordering of materials
- Other laboratory quality management tasks

Other duties and tasks may be determined by the laboratory director or supervisor.

Qualifications

Must be 21 years of age.
Laboratory Technicians must hold a bachelor’s degree in one of the chemical or biological sciences from an accredited college or university or have completed at least 2 years of college coursework from an accredited

college or university and at least 1 year of full-time, non-education-related practical experience in a laboratory performing analytical scientific testing in which the testing methods are or were recognized by an accrediting body. Background check required.

*These qualifications may vary by state according to their determined regulations on employee education requirements.

Laboratory QA Officer

The quality assurance officer has responsibility for the quality system and its implementation. The QAO has direct access to the highest level of management at which decisions are taken on lab policy and/or resources, and to the technical director. When the QAO is not present, a deputy shall be appointed.

In accordance with TNI, The laboratory's quality manager and/or his/her designee(s) shall:
a) serve as the focal point for QA/QC and be responsible for the oversight and/or review of quality control data;
b) have functions independent from laboratory operations for which they have quality assurance oversight;
c) be able to evaluate data objectively and perform assessments without outside (e.g., managerial) influence;
d) have documented training and/or experience in QA/QC procedures and the laboratory's quality system;
e) have a general knowledge of the analytical methods for which data review is performed;
f) arrange for or conduct internal audits as per Section 4.14 annually;
g) notify laboratory management of deficiencies in the quality system; and
h) monitor corrective actions.

NOTE: Where staffing is limited, the quality manager may also be the technical manager.

Reporting to Director of Operations

- Report/file any corrective actions/preventive actions and customer feedback
- Report failed samples to OHA with help of lab director.
- Maintain employee training files. Ensure staff is completely trained on SOPs, maintain DOC documents.
- Enter document change requests to the online "personnel resources" section of eviolabs.com for any SOPs that do not reflect the methods used in the lab
- Complete corrective action reports and preventive action reports (also submit online via "personnel resources")
- Review all outbound transfer manifests and shipments. Ensure that the manifest matches samples in the outbound batch. Make a copy of the transfer manifest and file.
- Perform data review for solvents and terpenes as directed
- Review completed certificates prior to release. Review reported data vs. instrument sheets, final certificate vs. subcontracted certs,
- Report test fails in accordance with rules simultaneously with customer report delivery.

- Maintain data packages for samples. Ensure that all sample intake forms, transfer manifests, and lab data packages are complete and organized in a manner that anyone in the lab can easily access data for any sample.
- Maintain Quartzy and order supplies. Ensure equipment IDs have been entered into quartzy.
- Enter test results into METRC for client reporting.
- Maintain lab logs such as fridge temp, scale calibrations, etc.
- Respond to regulatory data requests
- Ensure all documents are properly backed up and retained in accordance with TNI document retention requirements.
- Monitor QMS and training slack channels.
- As needed, arrange for hazwaste pickup, gas supply, water delivery.
- Ensure the office area you work in is organized and tidy so people can find archival documents, SOPs and regulations.
- Perform any micro analyses if requested.

Laboratory Administrator

Duties include:

- Reception
- Customer Support:
- Notify clients proactively of known issues such as testing delays or reported fails.
- Communicate sampling schedule to team so the lab can schedule resources and be prepared for intakes.
- Make bank deposits.
- Ensure that visitors to the lab complete visitor log.
- Track and handle office expenses and receipts. Send petty cash receipt purchases to accounting

Intake support, in accordance with SOPs

- Ensure that orders are properly entered into laboratory information systems and accounting systems.. Ensure that the entries are consistent.
- Schedule sampling appointments
- Handle in-lab transactions, (cash, check, credit card)
- Manage sample throughput including accepting samples, creating transport manifests.
- Perform first phase of intake:
    - Take orders, print order form and have client sign it.
    - Create payment receipt, or invoice if the client is on terms.
- Ensure all inbound samples have been verified in CC and imaged
- Organize samples prior to analysis.
- Complete transfer manifests.
- Collect receivables
- As training and accreditation allows, perform basic tests such as water activity.
- Perform duties of sampler (in-house) once trained.

Sampler

- Perform field sampling in accordance with EVIO SOPs, sampling training, and state rule
- Create and maintain sampling schedules with distributors. Communicate planned departure/arrival times with the labs.
- Complete all required sampling paperwork
- Receive and verify transport manifests, prepare transport container.
- Take and record temperature of the samples prior to leaving.
- Ensure that the subsample containers are completely labeled with sample number, test type, and weight of contents.
- Provide lab completed and fully signed transport manifests. Ensure copies are left with lab and bring documents with shipment.
- Assist staff with entering data to order entry system
- Receive payments from customers.

Sales

Reporting to the President of sales, responsible for engaging in customer relationships and maximizing revenue.

Responsibilities:

- Develop and grow customer relationships
- Develop plans and strategies for developing business and achieving the company's sales goals
- Create a culture of success and ongoing business and goal achievement
- Manage the sales teams, operations and resources to deliver profitable growth
- Manage the use of budgets
- Define optimal sales force structure
- Hire and develop sales staff
- Define and oversee sales staff compensation and incentive programs that motivate the sales team to achieve their sales targets
- Define and coordinate sales training programs that enable staff to achieve their potential and support company sales objectives
- Manage customer expectations and contribute to a high level of customer satisfaction
- Define sales processes that drive desired sales outcomes and identify improvements where and when required
- Put in place infrastructure and systems to support the success of the sales function
- Provide detailed and accurate sales forecasting
- Compile information and data related to customer and prospect interactions
- Monitor customer, market and competitor activity and provide feedback to company leadership team and other company functions
- Work closely with clients and act in advance of known issues such as testing delays or reported fails.

- Communicate sh the marketing function to establish successful support, channel and partner programs
- Manage key customer relationships and participate in closing strategic opportunities
- Travel for in-person meetings with customers and partners and to develop key relationships
- Communicate with clients throughout the testing process to minimize the number of calls going to the lab.
- Notify clients pampling schedule to team so the lab can schedule resources and be prepared for intakes.

EVIO Staff Training Policies & Responsible Vendor Training Program

All EVIO staff will receive training through HR for our internal policies and procedures. Agents shall complete training prior to performing job functions and training shall be tailored to the roles and responsibilities of the job function of each marijuana establishment agent

Certain employee trainings such as Employee Handbook and ethics policies are managed by HR, and tracked in our BambooHR platform.

Technical SOPs and policies, including job tasks, inventory control, security procedures are maintained in PowerDMS. PowerDMS administers training by providing policies, procedures, training materials including presentations and videos by providing a document control platform, and tracking employee's review and acknowledgement of the materials, and as applicable, confirmation of training by trainers or supervisors, and results of assessment quizzes. We also store in PowerDMS results of Demonstrations of Capability, Proficiency Tests, and and other required technical assessments based on job function. All lab employees are also required to complete all safety, data integrity, and quality management training segments.

Required Training for All Employees

QMS.100.010 Quality Manual
POL.100.010 Client Privacy Policy
POL.100.020 Maintaining Confidentiality of Client Information
POL.300.010 Electronic Signature Policy
POL.400.010 Code of Ethics
POL.500.010 Lab Safety Training Manual and Chemical Hygiene Plan
EVIO retains employee files to ensure annual training requirements and provides reminders of training renewals through the PowerDMS platform.

Additionally, as soon the Cannabis Control Commission approves a provider and program for the Responsible Vendor Training as per 935 CMR 500.105(2) we will enroll our employees to complete the required state training within the 90 day window for new hires, and shall have renewal training annually thereafter.

EVIO will track completion of all state required training, such as Responsible Vendor Training and METRC training in PowerDMS. Training records shall be maintained for a minimum of four years.

Applicable Rulemaking:

(2) Marijuana Establishment Agent Training.

(a) Marijuana Establishments shall ensure that all marijuana establishment agents complete training prior to performing job functions. Training shall be tailored to the roles and responsibilities of the job function of each marijuana establishment agent, and at a minimum must include a Responsible Vendor Program under 935 CMR 500.105(2)(b). At a minimum, staff shall receive eight hours of on-going training annually.

(b) Responsible Vendor Training.

1. On or after July 1, 2019, all current owners, managers and employees of a Marijuana Establishment that are involved in the handling and sale of marijuana for adult use at the time of licensure or renewal of licensure, as applicable, shall have attended and successfully completed a responsible vendor program to be designated a "responsible vendor."
2. Once a licensee is designated a "responsible vendor," all new employees involved in the handling and sale of marijuana for adult use shall successfully complete a responsible vendor program within 90 days of hire.
3. After initial successful completion of a responsible vendor program, each owner, manager, and employee involved in the handling and sale of marijuana for adult use shall successfully complete the program once every year thereafter to maintain designation as a "responsible vendor."
4. Administrative employees who do not handle or sell marijuana may take the "responsible vendor" program on a voluntary basis.
5. Marijuana establishments must maintain records of responsible vendor training program compliance for four years and make them available to inspection by the Commission and any other applicable licensing authority upon request during normal business hours.

SCOPE OF ACCREDITATION TO ISO/IEC 17025:2005

VIRIDIS ANALYTICS DBA EVIO LABS MASSACHUSETTS
40 Speen St #301
Framingham, MA 01701
James Kocis Phone: 508-465-3470
james.kocis@eviolabs.com

BIOLOGICAL

Valid To: November 30, 2020 Certificate Number: 4162.01

In recognition of the successful completion of the A2LA evaluation process, accreditation is granted to this laboratory to perform the following methods on cannabis flower, cannabis concentrates, cannabis extracts, cannabis infused products, and soil:

Test	Technology	Test Method
Aerobic Bacteria	qPCR	SOP.T.40.043.MA
Enterobacteriaceae	qPCR	SOP.T.40.043.MA
Escherichia coli (Pathogenic Strains)	qPCR	SOP.T.40.043.MA
Salmonella spp.	qPCR	SOP.T.40.043.MA
Total Coliforms	qPCR	SOP.T.40.043.MA
Total Yeast and Mold	qPCR	SOP.T.40.043.MA

CHEMICAL

Test	Technology	Test Method
Cannabinoids (δ9-THC, THCa, CBD, CBDa)	HPLC-PDA	SOP.073.MA
Heavy Metals (Arsenic, Cadmium, Mercury, Lead)	ICP-MS	SOP.T.40.060.MA
Mycotoxins (Aflatoxin B1, B2, G1, G2, Ochratoxin A)	HPLC-MS/MS	SOP.T.40.052.MA
Pesticides (Bifenazate, Bifenthrin, Cyfluthrin, Etoxazole, Imazalil, Imidacloprid, Myclobutanil, Spiromesifen, Trifloxystrobin)	HPLC-MS/MS	SOP.T.40.052.MA
Residual Solvents (Ethanol)	GC-MS	SOP.010.MA
Tocopherol Acetate	HPLC-PDA	SOP.T.40.070.MA

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Accredited Laboratory

A2LA has accredited

Viridis Analytics DBA EVIO Labs Massachusetts

Framingham, AR

for technical competence in the field of

Biological Testing

This laboratory is accredited in accordance with the recognized International Standard ISO/IEC 17025:2017 *General requirements for the competence of testing and calibration laboratories*. This accreditation demonstrates technical competence for a defined scope and the operation of a laboratory quality management system (*refer to joint ISO-ILAC-IAF Communiqué dated April 2017*).

Presented this 30th day of July 2018.

Vice President, Accreditation Services
For the Accreditation Council
Certificate Number 4162.01
Valid to November 30, 2020
Revised on August 24, 2020

For the tests to which this accreditation applies, please refer to the laboratory's Biological Scope of Accreditation.