

# SCHEDULED DELIVERY

Date: \_\_\_\_\_

Time: \_\_\_\_\_

Location:

The Farm Stand: 27 Industrial Park Rd. Saco, ME 04072  
**Robert B Messer - CGR25218**

House of Hash: 220 Maine Mall Rd. #17 South Portland, ME 04106  
**Stephanie Messer - CGR25337**

Paperwork:

Invoice

Trip Ticket

## PRODUCT INTAKE FORM

Product Name: \_\_\_\_\_

Lineage: \_\_\_\_\_

Indica    Sativa    Hybrid

Display Unit (Empty Jar)

Packaged Date: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

Additional Information: \_\_\_\_\_  
\_\_\_\_\_

Product Type:

Flower

Concentrate

Edible

Lab Test:

THC: \_\_\_\_\_

THCA: \_\_\_\_\_

CBD: \_\_\_\_\_

CBG: \_\_\_\_\_

CBGA: \_\_\_\_\_

Additional lab test documents

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