

Invoicing/Headquarter:  
E&H services, Inc.  
Budějovická 618/53  
140 00 Prague 4



# DISPATCH FORM

(FILL IN CAREFULLY, ESPECIALLY THOSE ITEMS\*)

**Sample delivery to the Laboratory (dully copy to post label):**  
CannabiLab, Dobrá 240, Building VUHZ  
Czech Republic, [info@cannabilab.eu](mailto:info@cannabilab.eu)  
M: +420-608 742 251

**Order no.**  
.....  
(only for E&H purpose)

CUSTOMER*		ADDRESS FOR INVOICE*		POSTAL ADDRESS (IF DIFFERENT TO CUSTOMER)	PAYMENT
Name					<input type="checkbox"/> bank transfer (preferred) <input type="checkbox"/> cash onsite  ..... approx. price / as agreed
Address					
VAT					
Contact					
SAMPLING INFORMATION			WAY OF REPORTING*		NOTES
Sampled		<input type="checkbox"/> in person <input type="checkbox"/> by post <input type="checkbox"/> by e-mail (preferred) .....@.....			
Date and time					
Method used					
Purpose					
Matrix					
LIMS No (only for E&H)	NAME OF SAMPLES*	PLACE OF SAMPLING	ANALYSIS*		NOTES

I hereby declare that under the terms of this agreement, in unexpected situations (instrumental defect or other), the laboratory can subcontract the order, whilst maintaining its responsibility for the highest quality of services. I undertake to pay the agreed price for the service provided within the email communication or offer.

**Customer** (date, signature): ..... **Take over at E&H** (date, time, signature): ..... **Review at E&H** (date, time, signature): .....