

Drug Screening Test Results

Company Information

Company Name: Corporate Management Group

Address: 12000 N. Washington St, Suite 350, Thornton, CO 80241

Name of Collector: Madison Higley

Donor Information

Donor First & Last Name: Jonathan Lopez

Reason for Test: Pre-employment Screening

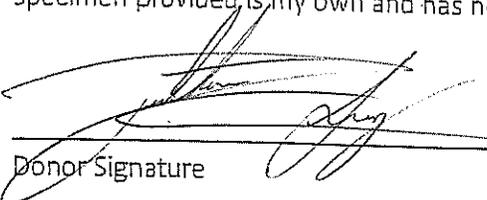
Screen Results

Date Collected: 2/5/2020

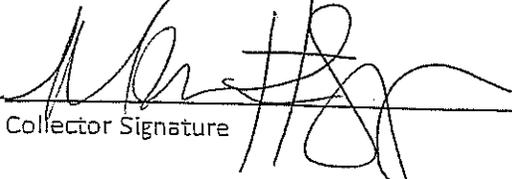
| Test | Pass | Fail |
|-----------------------|------|------|
| Cocaine (COC) | X | |
| Marijuana (THC) | X | |
| Opiate (OPI) | X | |
| Amphetamine (AMP) | X | |
| Methamphetamine (MET) | X | |

Certification

I hereby agree to submit to a saliva analysis for the purpose of testing for drug metabolites. The specimen provided is my own and has not been substituted or altered.


 Donor Signature _____ Date 2/5/2020

I hereby certify the specimen has been provided by the donor above.


 Collector Signature _____ Date 02/05/2020