MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES
SECTION FOR MEDICAL MARIJUANA REGULATION
MEDICAL MARIJUANA REGULATORY PROGRAM

MM FACILITY WORKSHEET 31

PRINT SAVE

IMPORTANT NOTE: Written responses to these questions must not refer to applicant facility business names and must refer to all individuals by title and initials only, e.g. "Owner A.E.M." or "Principal Officer R.W.M." If an applicant follows these directions, no redactions are necessary. However, if an applicant chooses to provide responses with applicant facility business names or individuals' names, the applicant must provide a redacted and unredacted version of those responses. Redactions must be applied to applicant facility business names and the names, addresses, and Social Security numbers of any individuals mentioned in the application. It is the applicant's responsibility to redact response worksheets and attachments to response worksheets for all applicable Facility Application Questions. Any responses to Facility Application Questions that do not properly redact information will not be scored. Only include information that must be redacted in responses and on worksheets when absolutely necessary.

In order to label all worksheets with an application identifier that need not be redacted, enter here a Facility Application ID consisting of four letters followed by four numbers. The same Facility Application ID should be entered on every worksheet for this application and all pages of any worksheet attachments:

Facility Application ID: ☐☐☐☐ ☐☐☐☐
(Enter letters) *(Enter Numbers)*

QUESTIONS FOR ALL TESTING FACILITIES ONLY

MM WORKSHEET 31 – TESTING FACILITIES; EXPERIENCE OF PERSONNEL WITH TESTING MARIJUANA, FOOD OR DRUGS FOR TOXINS AND/OR POTENCY AND HEALTH CARE INDUSTRY EXPERIENCE

DIRECTIONS: Complete this worksheet. Upload this worksheet and attachments to the on-line Missouri MMP Portal, as directed in the application.

15. Provide your proposed policy and/or documentation as it relates to the standards defined in ISO 17025:2017 relating to handli ng of test or calibration items (7.4).

A 10-page attachment is allowed for Question 15.
No narrative can be filled in on this worksheet.