

Destruction

The Principal Investigator (PI) is responsible for completion of all applicable sections in this form. Destruction of all samples must be completed by the [Safety, & Well-being Office](#) and, witnessed by two authorized individuals typically the PI and, an appropriate Safety & Well-being personnel. Students cannot act as witnesses for destruction.

Description of samples destroyed, including brand name, if applicable:

Form:

Quantity:

Include strength per unit, if applicable:

Location (address) of destruction:

Description of method used to destroy:

Date of destruction:

Samples destroyed:

Sample identification number	Net weight or volume (if liquid) prior to destruction

WITNESSES

I, the undersigned, certify that I am an employee of Western University and that I have witnessed the destruction of the cannabis described above as per the method described above.

Name: _____ Signature: _____ Date: _____

Name: _____ Signature: _____ Date: _____