Additional information: LCC Bit Semipledies Post Fight To be completed and verified by collector/validator: Collector's Name: Interfactory in the information in the provided in the process. Collection Date: Status Yalidator's Name: Interfactory in the information in the provided in the process. Collection Date: Status Status Yalidator Affidavit: I certify that I witnessed the donor during the collection process. The collection container and specimen remained in constant view of the donor and me in constant view of the donor and me in constant view of the donor and me in the interfactory. Yalidator Affidavit: I certify that I witnessed the donor during the collection process. The collection container and specimen remained in constant view of the donor and me into introl of the donor provided the specimen on this date in accordance with specified collection procedures. I further certify the specimen was given to me by the donor and was packaged and sealed and will be given to entity identified below. X Collector Affidavit: I certify that the donor provided the specimen on this date in accordance with specified collection procedures. I further certify the specimen was given to me by the donor and was packaged and sealed and will be given to entity identified below. X Collector Affidavit: I certify that I provided the specimen on this date in accordance with specified collection procedures. I further certify that I groups and the provided the specimen vial Seals Intact: Yes N		
Urine Blood Passport Blood hGH Pre Fight Specimen ID: \$00620575 Additional Information: LKC LSG Post Fight \$00620575 To be completed and verified by collector/validator: Collection Date: \$123/24/5 Collector's Name: WW Collector/validator: Collection Date: Sport: Pro MAA WEC Optional On site Specimen Assessment: Specific Gravity: 1028 PH: Sport: Pro MAA WEC Optional On site Specimen Assessment: Specific Gravity: 1028 PH: Sport: Pro MAA WEC Optional On site Specimen Assessment: Specific Gravity: 1028 PH: Sport: Pro MAA WEC Validator's Mame: WEC PH: S-S Yaldator Affidavit: Lertify that I witnessed the donor during the collection process. The collection container and specimen remained in constant view of the donor and me assessment: X Validator's Stefnature Date Collector Affidavit: Lertify that the donor provided the specimen on this date in accordance with specified collection procedures. I further certify the specimen was given to me by the donor and was packaged and sealed and will be given to entity identified below. X Collector Stefnature Ostar Collector Stefnature Waybill/Airbill# Outrier: Date To be completed by Laboratory: Received By: Accessioner's Signature Accessioner's Signature date/time Donor's	Drug Testing Custody and Control	Form
Collector's Name:	✓ Urine □ Blood Passport □ Blood hGH Specime ✓ Out of Competition □ In Competition □ Pre Fight	
specimen remained in control of the donor throughout this process and remained in constant view of the donor and me X	Collector's Name: Validator's Name: Sport: DR 0 M M + LAE(Donor's Gender	
to entity identified below. X	specimen remained in control of the donor throughout this process and remained in X	constant view of the donor and me.
To be completed by Laboratory: Received By: Accessioner's Signature date/time Accessioner PRINT Name Specimen Vial Seals Intact: YES To be completed by collector and verified by donor: (not to be included on lab copy) Completed by collector and verified by donor: (not to be included on lab copy) Donor's Name Donor's ID # Donor Affidavit: I certify that I provided this specimen. The specimen was in my control until the collector packaged the specimen in the vials and applied the security seal(s). The information provided on this form and on the labels affixed to the specimen bottles are correct. I hereby authorize the testing laboratory to release the results of the test to the designated designee By signing below. I hereby accept the risk of adverse public notice of the test results, embarrassment, criticism, financia loss or other action, and expressly waive any claims for damages as a result thereof. Public release of the test results does not impose liability for defamation or constitute a ground for recovery in action. X X	x 05/03/0015 / 7 Collector's signature Date Specimen to be released to: SMRTL (by hand delivery) □ Courier: Waybill/Airbill#	
To be completed by collector and verified by donor: (not to be included on lab copy) Donor's Name Donor's ID # Donor's ID # Donor's ID the specimen was in my control until the collector packaged the specimen in the vials and applied the security seal(s). The information provided on this form and on the labels affixed to the specimen bottles are correct. I hereby authorize the testing laboratory to release the results of the test to the designated designee By signing below. Thereby accept the risk of adverse public notice of the test results, embarrassment, criticism, financia loss or other action, and expresslywaive inv claims for damages as a result thereof. Public release of the test results does not impose liability for defamation or constitute a ground for recovery in activil action. 23^{M}	To be completed by Laboratory: Received By: Accessioner's Signature date/time	ccessioner PRINT Name
specimen in the vials and applied the security seal(s). The information provided on this form and on the labels affixed to the specimen bottles are correct. I hereby authorize the testing laboratory to release the results of the test to the designated designee By signing below. I hereby accept the risk of adverse public notice of the test results, embarrassment, criticism, financia loss or other action, and expressly waive any claims for damages as a result thereof. Public release of the test results does not impose liability for defamation or constitute a ground for recovery in activil action.	To be completed by collector and verified by donor: (not to be COAOF MCGRGOS	e included on lab copy)
	specimen in the vials and applied the security seal(s). The information provided on the specimen bottles are correct. I hereby authorize the testing laboratory to release designated designee By signing below, I hereby accept the risk of adverse public notice of the test results, loss or other action, and expressly waive any claims for damages as a result thereof. does not impose liability for defamation or constitute a ground for recovery in activity	his form and on the labels affixed to e the results of the test to the embarrassment, criticism, financial Public release of the test results

 \vee

Drug Testing Custody and Control Form Testing Authority: Nevada 4 OMM SSION □ Urine 🛛 🕰 Blood Passport 🗆 Blood hGH Specimen ID: 5008083149 □ Pre Fight Out of Competition □ In Competition SPECIMEN ID NO. □ Post Fight Additional Information: To be completed and verified by collector/validator: Collector's Name: 21 Marca Collection Date: \mathfrak{D} Validator's Name: Cur Donor's Gender: 🗖 Male 🗆 Female Sport: 20 M\ Optional On site Specimen Assessment: Specific Gravity: Validator Affidavit: I certify that I witnessed the donor during the collection process. The collection container and specimen remained in control of the sponor throughout this process and remained in constant view of the donor and me. Signature Collector Affidavit: I certify that the donor provided the specimen on this date in accordance with specified collection procedures. I further certify the specimen was given to me by the donor and was packaged and sealed and will be given to entity identified below. <u>5 7.41</u> am/pm Collector's Signature Specimen to be released to: SMRTL (by hand delivery) Courier: Waybill/Airbill# Other: To be completed by Laboratory: Received By: Accessioner's Signature date/time Accessioner PRINT Name **Specimen Vial Seals Intact:** To be completed by collector and verified by donor: (not to be included on lab copy) Donor's Name Donor's ID # Donor Affidavit: I certify that I provided this specimen. The specimen was in my control until the collector packaged the specimen in the vials and applied the security seal(s). The information provided on this form and on the labels affixed to the specimen bottles are correct. I hereby authorize the testing laboratory to release the results of the test to the designated designee.

Donor's Signature

Date

Drug Testing Custody and Control Form
Testing Authority: Autho
To be completed and verified by collector/validator:
Collector's Name: M </td
Validator Affidaviz: I certify that I witnessed the donor during the collection process. The collection container and
specimen remained in control of the donor throughout this process and remained in constant view of the donor and me. X
Collector Affidavit: I certify that the donor provided the specimen on this date in accordance with specified collection
procedures. I further certify the specimen was given to me by the donor and was packaged and sealed and will be given
to entity identified below. $X \longrightarrow Collector 5 signature Date Time Time$
Specimen to be released to:
MRTL (by hand delivery) Courier: Waybill/Airbill# Other:
To be completed by Laboratory:
Received By:
Accessioner's Signature date/time Accessioner PRINT Name
Specimen Vial Seals Intact: 🛛 YES 🗌 NO
To be completed by collector and verified by donor: (not to be included on lab copy)

Donor's Name

Donor's ID #

Donor Affidavit: I certify that I provided this specimen. The specimen was in my control until the collector packaged the specimen in the vials and applied the security seal(s). The information provided on this form and on the labels affixed to the specimen bottles are correct. I hereby authorize the testing laboratory to release the results of the test to the designated designee.

23rd May

Donol s Signature

Date



CONFIDENTIAL TEST REPORT

Christopher A. Eccles Attorney General of Nevada 555 E. Washington Ave., Suite 3900 Las Vegas, NV 89101

Program:	WADA Partial Menu	Collection Date:	5/23/2015
Lab ID:	295840	Lab Receipt Date:	5/29/2015
Specimen ID:	S006205751	Report Date:	6/12/2015
Test type:	Out of competition	Orig. Report Date:	
Mission Ref#:	UFC189	Gender:	Male
Sport:	Mixed Martial Arts	Sample Matrix:	Urine
Discipline:	Mixed Martial Arts	pH:	5.1
Container:	A Bottle 295840-1	Specific Gravity:	1.021
		LH:	4.3 mIU/mL

Analysis Requested: Specimen was analyzed for Anabolic Agents (S1); Peptide Hormones, Growth Factors and Related Substances (S2); Beta-2 Agonists (S3); Hormone and Metabolic Modulators (S4) and Diuretics and Other Masking Agents (S5) using GC/MS, LC/MS and Immunoassay test methods.
 Result: No Prohibited Substance(s) or Prohibited Method(s), or their Metabolite(s) or Marker(s) on the test menu were detected.

Unless otherwise noted the condition of the specimen was acceptable when received at the laboratory.

Endogenous Steroid Data (screen):							
Andro	Etio	DHEA	Epi	Test	T/E	5α-diol	5β-diol
1600 ng/mL	3100 ng/mL	43 ng/mL	20 ng/mL	34 ng/mL	1.7	86 ng/mL	290 ng/mL

Vinod Nair

Vinod Kair

Friday, June 12, 2015

Date

Certified By

Signature

Accredited by the American Association for Laboratory Accreditation as compliant with the requirements of ISO/IEC 17025, Testing Certificate 2500.01.

5/23/2015 5/24/2015 5/26/2015

Male Blood



Sports Medicine Research & Testing 560 Arapeen Dr. Suite 150 Salt Lake City, UT 84108 Tel: +1 (801) 994 9454 Fax: +1 (801) 994 9455

CONFIDENTIAL TEST REPORT

Christopher A. Eccles Attorney General of Nevada 555 E. Washington Ave., Suite 3900 Las Vegas, NV 89101

Program:	Complete Blood Count	Collection Date:
Lab ID:	294953	Lab Receipt Date:
Specimen ID:	S008083149	Report Date:
Test type:	Out of competition	Orig. Report Date:
Mission Ref#:	UFC 189	Gender:
Sport:	Mixed Martial Arts	Sample Matrix:
Discipline:	Mixed Martial Arts	
Container:	Whole Blood Tube - A 294953-1	

Analysis Requested: Specimen was analyzed for hematological parameters.

Unless otherwise noted the condition of the specimen was acceptable when received at the laboratory.

Parameter	Analysis
Instrument: XT-2000i #1	Date: 24-May-2015 20:29
Red blood cells	4.49 10^6/uL
Hemoglobin	14.5 g/dL
Hematocrit	41.9 %
Mean corpuscular volume	93.3 fL
Mean corpuscular hemoglobin	32.3 pg
Mean corpuscular hb concentr.	34.6 g/dL
Reticulocyte percentage	0.96 %
Reticulocyte number	0.0431 10^6/uL
RDW Standard Deviation	41.3 fL
Immature Reticulocyte Fraction	8.8 %
Off-Score	86.2

Judy Field

July 2. Juil

Tuesday, May 26, 2015

Date

Certified By

Signature

Accredited by the World Anti-Doping Agency as compliant with the requirements of the World Anti-Doping Code.

Accredited by the American Association for Laboratory Accreditation as compliant with the requirements of ISO/IEC 17025, Testing Certificate 2500.01.



CONFIDENTIAL TEST REPORT

Christopher A. Eccles Attorney General of Nevada 555 E. Washington Ave., Suite 3900 Las Vegas, NV 89101

Program:	Human Growth Hormone	Collection Date:	5/23/2015
Lab ID:	294951	Lab Receipt Date:	5/24/2015
Specimen ID:	S006205785	Report Date:	6/2/2015
Test type:	Out of competition	Orig. Report Date:	
Mission Ref#:	UFC 189	Gender:	Male
Sport:	Mixed Martial Arts	Sample Matrix:	Blood
Discipline:	Mixed Martial Arts		
Container:	Serum Separator Tube - A 294951-1		
Result:	Specimen was analyzed for Peptide Hor including Growth Hormone (hGH) using No Prohibited Substance(s) or Prohibite test menu were detected. wise noted the condition of the specimen	JImmunoassay test methods. ed Method(s), or their Metabo	olite(s) or Marker(s) on the
GH Data:			

hGH ratio .716 X:1 hGH Kit 1

Judy Field

Jung 2. Juil

Tuesday, June 02, 2015

Date

Certified By

hG

Signature

Accredited by the World Anti-Doping Agency as compliant with the requirements of the World Anti-Doping Code.

Accredited by the American Association for Laboratory Accreditation as compliant with the requirements of ISO/IEC 17025, Testing Certificate 2500.01.

Drug Testing Custody and Control Form
Testing Authority: Newada Attractic Conmission X Urine Blood Passport Blood hGH Specimen ID X Out of Competition In Competition Pre Fight S007232259 Additional Information: UFC 189 Post Fight SPECIMEN ID NO.
To be completed and verified by collector/validator: Collector's Name:Collection Date:
Validator's Name: <u>IN GROPARY</u> Donor's Gender: Male Demale Sport: <u>DRO MAA - UFC</u> Optional On site Specimen Assessment: Specific Gravity: <u>1004</u> pH: <u>6.5</u>
<u>Validator Affidavit</u> : I certify that I witnessed the donor during the collection process. The collection container and specimen remained in control of the donor throughout this process and remained in constant view of the donor and me. X
<u>Collector Affidavit</u> : I certify that the donor provided the specimen on this date in accordance with specified collection procedures. I further certify the specimen was given to me by the donor and was packaged and sealed and will be given to entity identified below.
x <u>Collector's Signature</u> <u>Collector's Signature</u> <u>Collector's Signature</u> <u>Date</u> <u>Time</u>
Specimen to be released to: SMRTL (by hand delivery) Courier: Waybill/Airbill# Other:
To be completed by Laboratory: Received By:
Accessioner's Signature date/time Accessioner PRINT Name
Specimen Vial Seals Intact: 🗆 YES 🗆 NO
To be completed by collector and verified by donor: (not to be included on lab copy)
Jereny Stephens
Donor's Name Donor's ID #

<u>Donor Affidavit</u>: I certify that I provided this specimen. The specimen was in my control until the collector packaged the specimen in the vials and applied the security seal(s). The information provided on this form and on the labels affixed to the specimen bottles are correct. I hereby authorize the testing laboratory to release the results of the test to the designated designee.

Х

6-1-15 Date

Donor's Signature

Drug Testing Custody and Control Form
Testing Authority: Nevada A+h etc. (OMNISSION \Box Urine XBlood Passport \Box Blood hGHSpecimen ID: \checkmark Out of Competition \Box In CompetitionAdditional Information: $UFC 189$
To be completed and verified by collector/validator: Collector's Name: Im Validator's Name: Im Validator's Name: Im Sport: Im Optional On site Specimen Assessment: Specific Gravity:
<u>Validator Affidavit:</u> I certify that I witnessed the donor during the collection process. The collection container and specimen remained in constant view of the donor and me. X
<pre>contector Annually repreting that the donor provided the specific of this date in decordance with openhed donetion procedures. I further certify the specimen was given to me by the donor and was packaged and sealed and will be given to entity identified below. XContector's Signature Date Time Specimen to be released to: X_SMRTL (by hand delivery) Courier:Waybill/Airbill#</pre>
□ Other: To be completed by Laboratory: Received By: Accessioner's Signature date/time Accessioner PRINT Name Specimen Vial Seals Intact: □ YES □ NO
To be completed by collector and verified by donor: (not to be included on lab copy)
<u>Donor Affidavit</u> : I certify that I provided this specimen. The specimen was in my control until the collector packaged the specimen in the vials and applied the security seal(s). The information provided on this form and on the labels affixed to the specimen bottles are correct. I hereby authorize the testing laboratory to release the results of the test to the designated designee.

6-1-15 Х Date Donor's Signature

Drug Testing Custody and Control Form
Testing Authority: Nevada Athetic Commission Durine Blood Passport Blood hGH Specimen ID: S007232283 Additional Information: UFC 189 Testing Authority: Nevada Athetic Commission Specimen ID: S007232283 Pre Fight Post Fight Specimen ID: Specimen ID: S007232283 Specimen ID NO.
To be completed and verified by collector/validator: Collector's Name: Image: Collector Section Date: Validator's Name: Image: Collector Section Date: Validator's Name: Image: Collector Section Date: Sport: Collection Date: Optional On site Specimen Assessment: Specific Gravity:
Validator Affidavit: I certify that I witnessed the donor during the collection process. The collection container and specimen remained in control of the donor throughout this process and remained in constant view of the donor and me. X
procedures. I further certify the specimen was given to me by the donor and was packaged and sealed and will be given to entity identified below. $x - \frac{6}{11/5} - \frac{4'40}{4'40}$ am/pm Date Time Specimen to be released to: $x = \frac{6}{11/5} - \frac{4'40}{10}$ Time
D Other:
To be completed by Laboratory: Received By:
Accessioner's Signature date/time Accessioner PRINT Name Specimen Vial Seals Intact: YES NO
To be completed by collector and verified by donor: (not to be included on lab copy)
Jereny Stephens Donor's Name Donor's ID #

<u>Donor Affidavit</u>: I certify that I provided this specimen. The specimen was in my control until the collector packaged the specimen in the vials and applied the security seal(s). The information provided on this form and on the labels affixed to the specimen bottles are correct. I hereby authorize the testing laboratory to release the results of the test to the designated designee.

Donor's Signature

6.1-15



CONFIDENTIAL TEST REPORT

Christopher A. Eccles Attorney General of Nevada 555 E. Washington Ave., Suite 3900 Las Vegas, NV 89101

Program:	WADA Partial Menu	Collection Date:	6/1/2015
Lab ID:	296854	Lab Receipt Date:	6/4/2015
Specimen ID:	S007232259	Report Date:	6/12/2015
Test type:	Out of competition	Orig. Report Date:	
Mission Ref#:	UFC 189	Gender:	Male
Sport:	Mixed Martial Arts	Sample Matrix:	Urine
Discipline:	Mixed Martial Arts	pH:	7.5
Container:	A Bottle 296854-1	Specific Gravity:	1.005
		LH:	.3 mIU/mL

Analysis Requested: Specimen was analyzed for Anabolic Agents (S1); Peptide Hormones, Growth Factors and Related Substances (S2); Beta-2 Agonists (S3); Hormone and Metabolic Modulators (S4) and Diuretics and Other Masking Agents (S5) using GC/MS, LC/MS and Immunoassay test methods.
 Result: No Prohibited Substance(s) or Prohibited Method(s), or their Metabolite(s) or Marker(s) on the test menu were detected.

Unless otherwise noted the condition of the specimen was acceptable when received at the laboratory.

Endogenous Steroid Data (screen):							
Andro	Etio	DHEA	Epi	Test	T/E	5α-diol	5β-diol
200 ng/mL	320 ng/mL	3.5 ng/mL	2.6 ng/mL	2.2 ng/mL	.85	<loq< td=""><td>22 ng/mL</td></loq<>	22 ng/mL

Vinod Nair

Vinod Kair

Friday, June 12, 2015

Date

Certified By

Signature

Accredited by the World Anti-Doping Agency as compliant with the requirements of the World Anti-Doping Code.

Accredited by the American Association for Laboratory Accreditation as compliant with the requirements of ISO/IEC 17025, Testing Certificate 2500.01.

The results contained herein relate only to the items tested. This report shall not be reproduced, except in full, without the expressed written consent of the Laboratory.

6/1/2015 6/2/2015 6/2/2015

Male Blood



Sports Medicine Research & Testing 560 Arapeen Dr. Suite 150 Salt Lake City, UT 84108 Tel: +1 (801) 994 9454 Fax: +1 (801) 994 9455

CONFIDENTIAL TEST REPORT

Christopher A. Eccles Attorney General of Nevada 555 E. Washington Ave., Suite 3900 Las Vegas, NV 89101

Program:	Complete Blood Count	Collection Date:
Lab ID:	296268	Lab Receipt Date:
Specimen ID:	S007232275	Report Date:
Test type:	Out of competition	Orig. Report Date:
Mission Ref#:	UFC 189	Gender:
Sport:	Mixed Martial Arts	Sample Matrix:
Discipline:	Mixed Martial Arts	
Container:	Whole Blood Tube - A 296268-1	

Analysis Requested: Specimen was analyzed for hematological parameters.

Unless otherwise noted the condition of the specimen was acceptable when received at the laboratory.

Parameter	Analysis
Instrument: XT-2000i-2	Date: 2-Jun-2015 14:47
Red blood cells	4.91 10^6/uL
Hemoglobin	14.8 g/dL
Hematocrit	41.8 %
Mean corpuscular volume	85.1 fL
Mean corpuscular hemoglobin	30.1 pg
Mean corpuscular hb concentr.	35.4 g/dL
Reticulocyte percentage	1.05 %
Reticulocyte number	0.0516 10^6/uL
RDW Standard Deviation	36.0 fL
Immature Reticulocyte Fraction	9.0 %
Off-Score	86.5

Judy Field

July 2. Juil

Tuesday, June 02, 2015

Date

Certified By

Signature

Accredited by the World Anti-Doping Agency as compliant with the requirements of the World Anti-Doping Code.

Accredited by the American Association for Laboratory Accreditation as compliant with the requirements of ISO/IEC 17025, Testing Certificate 2500.01.



CONFIDENTIAL TEST REPORT

Christopher A. Eccles Attorney General of Nevada 555 E. Washington Ave., Suite 3900 Las Vegas, NV 89101

Program:	Human Growth Hormone	Collection Date:	6/1/2015
Lab ID:	296279	Lab Receipt Date:	6/2/2015
Specimen ID:	S007232283	Report Date:	6/10/2015
Test type:	Out of competition	Orig. Report Date:	
Mission Ref#:	UFC 189	Gender:	Male
Sport:	Mixed Martial Arts	Sample Matrix:	Blood
Discipline:	Mixed Martial Arts		
Container:	Serum Separator Tube - A 296279-1		
Analysis Requested:	Specimen was analyzed for Peptide H including Growth Hormone (hGH) usi		
Result:	No Prohibited Substance(s) or Prohibitest menu were detected.	ited Method(s), or their Metab	olite(s) or Marker(s) on the
Unless other	vise noted the condition of the specime	en was acceptable when receive	ed at the laboratory.
hGH Data:			

hGH ratio .689 X:1 hGH Kit 1

Judy Field

Jung 2. Juil

Wednesday, June 10, 2015

Date

Certified By

Signature

Accredited by the World Anti-Doping Agency as compliant with the requirements of the World Anti-Doping Code.

Accredited by the American Association for Laboratory Accreditation as compliant with the requirements of ISO/IEC 17025, Testing Certificate 2500.01.

The results contained herein relate only to the items tested. This report shall not be reproduced, except in full, without the expressed written consent of the Laboratory.

Drug Testing Custody and Control Form	
Testing Authority: Neuada Athletic Commission X Urine Blood Passport Blood hGH Specimen ID: X Out of Competition In Competition Pre Fight S007232325 Additional Information: WFC 189 Post Fight SPECIMEN ID	NO.
To be completed and verified by collector/validator: Collector's Name: Im GWEMSEY Collection Date: 6/7/15 Validator's Name: Im GWEMSEY Collection Date: 6/7/15 Validator's Name: Im GWEMSEY Donor's Gender: Male Female Sport: AD-MMA-UFC Im Im <t< td=""><td></td></t<>	
Validator Affidavit: I certify that I witnessed the donor during the collection process. The collection container and specimen remained in control of the donor throughout this process and remained in constant view of the donor and me. X $6/7/15$ Validator's Signature Date	
Collector Affidavit: I certify that the donor provided the specimen on this date in accordance with specified collection procedures. I further certify the specimen was given to me by the donor and was packaged and sealed and will be given to entity identified below. X	
To be completed by Laboratory: Received By:	
To be completed by collector and verified by donor: (not to be included on lab copy)	

Bernudez Donor's Name

Donor's ID #

<u>Donor Affidavit</u>: I certify that I provided this specimen. The specimen was in my control until the collector packaged the specimen in the vials and applied the security seal(s). The information provided on this form and on the labels affixed to the specimen bottles are correct. I hereby authorize the testing laboratory to release the results of the test to the designated designee.

Donor's Signature Date

Drug Testing Custody and Control Form
Testing Authority: Neuroda A+fkletii CommisSion Urine X Blood Passport Blood hGH Specimen ID: X Out of Competition In Competition Pre Fight S007232226 Additional Information: UFC Ref Specimen ID:
To be completed and verified by collector/validator: Collector's Name: Image: Collector/validator: Validator's Name: Image: Collector/validator: Sport: Collection Date: Optional On site Specimen Assessment: Specific Gravity:
Validator Affidavit: I certify that I witnessed the donor during the collection process. The collection container and specimen remained in constant view of the donor and me. X
Collector Affidavit: I certify that the donor provided the specimen on this date in accordance with specified collection procedures. I further certify the specimen was given to me by the donor and was packaged and sealed and will be given to entity identified below. X Image: Collector's Signature Specimen to be released to: Image: Collector's Signature Y Image: Collector's Signature SMRTL (by hand delivery) Image: Collector's
To be completed by Laboratory: Received By:
Dennis Benudez

Donor's Name

Donor's ID #

<u>Donor Affidavit</u>: I certify that I provided this specimen. The specimen was in my control until the collector packaged the specimen in the vials and applied the security seal(s). The information provided on this form and on the labels affixed to the specimen bottles are correct. I hereby authorize the testing laboratory to release the results of the test to the designated designee.

Donor Signature

Drug Testing Custod	y and Control Form
SCULT OF LOMBETITION 👘 In Competition	OM ISSION Specimen ID: Pre Fight Post Fight S007232218 SPECIMEN ID NO.
To be completed and verified by collector/validator Collector's Name:	Collection Date: $6/7/5$ Donor's Gender: Male \Box Female
Validator Affidavit: I certify that I witnessed the donor during specimen remained in-control of the donor throughout this pr X	Process and remained in constant view of the donor and me.
Collector Affidavit: I certify that the donor provided the special procedures. I further certify the specimen was given to me by to entity identified below. X	•
SMRTL (by hand delivery)	irbill#
To be completed by Laboratory: Received By:	
Accessioner's Signature dat Specimen Vial Seals Intact: YES NO	e/time Accessioner PRINT Name
To be completed by collector and verified by Dennis Bemulez	
Donor's Name	Donor's ID #

<u>Donor Affidavit</u>: I certify that I provided this specimen. The specimen was in my control until the collector packaged the specimen in the vials and applied the security seal(s). The information provided on this form and on the labels affixed to the specimen bottles are correct. I hereby authorize the testing laboratory to release the results of the test to the designated designee.

Х Donor's Signature Dafe



CONFIDENTIAL TEST REPORT

Christopher A. Eccles Attorney General of Nevada 555 E. Washington Ave., Suite 3900 Las Vegas, NV 89101

Program: Lab ID:	WADA Partial Menu 297263	Collection Date: Lab Receipt Date:	
Specimen ID:		Report Date:	
Test type:	Out of competition	Orig. Report Date:	
Mission Ref#:	UFC189	Gender:	Male
Sport:	Mixed Martial Arts	Sample Matrix:	Urine
Discipline:	Mixed Martial Arts	pH:	5.5
Container:	A Bottle 297263-1	Specific Gravity:	1.021
		LH:	15.9 mIU/mL

Analysis Requested: Specimen was analyzed for Anabolic Agents (S1); Peptide Hormones, Growth Factors and Related Substances (S2); Beta-2 Agonists (S3); Hormone and Metabolic Modulators (S4) and Diuretics and Other Masking Agents (S5) using GC/MS, LC/MS and Immunoassay test methods.
 Result: No Prohibited Substance(s) or Prohibited Method(s), or their Metabolite(s) or Marker(s) on the test menu were detected.

Unless otherwise noted the condition of the specimen was acceptable when received at the laboratory.

Endogenous	Endogenous Steroid Data (screen):						
Andro	Etio	DHEA	Epi	Test	T/E	5α-diol	5β-diol
1900 ng/mL	1200 ng/mL	34 ng/mL	11 ng/mL	29 ng/mL	2.6	230 ng/mL	270 ng/mL

Vinod Nair

Vinod Kair

Signature

Monday, June 15, 2015

Date

Certified By

Accredited by the World Anti-Doping Agency as compliant with the requirements of the World Anti-Doping Code.

Accredited by the American Association for Laboratory Accreditation as compliant with the requirements of ISO/IEC 17025, Testing Certificate 2500.01.

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Sports Medicine Research & Testing 560 Arapeen Dr. Suite 150 Salt Lake City, UT 84108 Tel: +1 (801) 994 9454 Fax: +1 (801) 994 9455

CONFIDENTIAL TEST REPORT

Christopher A. Eccles Attorney General of Nevada 555 E. Washington Ave., Suite 3900 Las Vegas, NV 89101

Program:	Complete Blood Count	Collection Date:	6/7/2015
Lab ID:	297235	Lab Receipt Date:	6/8/2015
Specimen ID:	S007232226	Report Date:	6/9/2015
Test type:	Out of competition	Orig. Report Date:	
Mission Ref#:	UFC 189	Gender:	Male
Sport:	Mixed Martial Arts	Sample Matrix:	Blood
Discipline:	Mixed Martial Arts		
Container:	Whole Blood Tube - A 297235-1		

Analysis Requested: Specimen was analyzed for hematological parameters.

Unless otherwise noted the condition of the specimen was acceptable when received at the laboratory.

Parameter	Analysis
Instrument: XT-2000i #1	Date: 8-Jun-2015 13:19
Red blood cells	4.53 10^6/uL
Hemoglobin	14.7 g/dL
Hematocrit	42.2 %
Mean corpuscular volume	93.2 fL
Mean corpuscular hemoglobin	32.5 pg
Mean corpuscular hb concentr.	34.8 g/dL
Reticulocyte percentage	1.19 %
Reticulocyte number	0.0539 10^6/uL
RDW Standard Deviation	42.0 fL
Immature Reticulocyte Fraction	9.2 %
Off-Score	81.5

Judy Field

July 2. Juil

Tuesday, June 09, 2015

Date

Certified By

Signature

Accredited by the World Anti-Doping Agency as compliant with the requirements of the World Anti-Doping Code.

Accredited by the American Association for Laboratory Accreditation as compliant with the requirements of ISO/IEC 17025, Testing Certificate 2500.01.



CONFIDENTIAL TEST REPORT

Christopher A. Eccles Attorney General of Nevada 555 E. Washington Ave., Suite 3900 Las Vegas, NV 89101

Program:	Human Growth Hormone	Collection Date:	6/7/2015
Lab ID:	297237	Lab Receipt Date:	6/8/2015
Specimen ID:	S007232218	Report Date:	6/12/2015
Test type:	Out of competition	Orig. Report Date:	
Mission Ref#:	UFC 189	Gender:	Male
Sport:	Mixed Martial Arts	Sample Matrix:	Blood
Discipline:	Mixed Martial Arts		
Container:	Serum Separator Tube - A 297237-1		
5 1	Specimen was analyzed for Peptide Ho including Growth Hormone (hGH) using No Prohibited Substance(s) or Prohibite	g Immunoassay test methods.	
Result:	test menu were detected.		
Unless other	vise noted the condition of the specimen	was acceptable when receive	ed at the laboratory.
H Data:			

hGH Data:				
hGH ratio	.358 X:1	hGH Kit 2		

Judy Field

July 2. Juil

Friday, June 12, 2015

Date

Certified By

Signature

Accredited by the World Anti-Doping Agency as compliant with the requirements of the World Anti-Doping Code.

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Drug Testing Custody and Control Form
Testing Authority: Netada Athetic Commission Wrine Blood Passport Blood hGH Specimen ID: Wout of Competition In Competition Pre Fight \$006205819 Additional Information: UFC 189 Specimen ID: Specimen ID:
To be completed and verified by collector/validator: Collector's Name:
Validator Affidavit: I certify that I witnessed the donor during the collection process. The collection container and specimen remained in constant view of the donor and me. X Validator's Signature Date
Collector Affidavit: I certify that the donor provided the specimen on this date in accordance with specified collection procedures. I further certify the specimen was given to me by the donor and was packaged and sealed and will be given to entity identified below X
To be completed by Laboratory: Received By:
To be completed by collector and verified by donor: (not to be included on lab copy)

Donor Affidavit: I certify that I provided this specimen. The specimen was in my control until the collector packaged the specimen in the vials and applied the security seal(s). The information provided on this form and on the labels affixed to the specimen bottles are correct. I hereby authorize the testing laboratory to release the results of the test to the designated designee.

Date

Donor's Signature

Drug Testing Custor	ly and Control Form
A ULL OF COMPETITION IT IN COMPETITION	MISSION Specimen ID: Pre Fight Post Fight SPECIMEN ID NO.
To be completed and verified by collector/validato Collector's Name: Jrp Guy ASEY Validator's Name: Jrp Guy ASEY Sport: DO MMA UFC Optional On site Specimen Assessment: Specific Gravity	Collection Date: 6615 Donor's Gender: A Male \Box Female
Validator Affidavit: I certify that I witnessed the donor during specimen remained in control of the donor throughout this p X	
Collector Affidavit: I certify that the donor provided the speci procedures. I further certify the specimen was given to me by to entity identified-below XCollector's Signature Specimen to be released to: XSMRTL (by hand delivery) □ Courier: Waybill/A □ Other:	the donor and was packaged and sealed and will be given $ \frac{1}{16} \frac{1}{15} \frac{2.22}{\text{Time}} \text{ ampm} $
To be completed by Laboratory: Received By:	te/time Accessioner PRINT Name
Specimen Vial Seals Intact: YES NO	
To be completed by collector and verified by Roy MacDonald	donor: (not to be included on lab copy)

<u>Donor Affidavit</u>: I certify that I provided this specimen. The specimen was in my control until the collector packaged the specimen in the vials and applied the security seal(s). The information provided on this form and on the labels affixed to the specimen bottles are correct. I hereby authorize the testing laboratory to release the results of the test to the designated designee.

By signing below, I hereby accept the risk of adverse public notice of the test results, embarrassment, criticism, financial loss or other action, and expressly waive any claims for damages as a result thereof. Public release of the test results does not impose Rability for defamation or constitute a ground for recovery in a civil action.

616115

Donor's Signature

Date

Drug Testing Custody and Control Form				
Testing Authority: <u>Nevada</u> A+F □ Urine □ Blood Passport & Blood hGH XOut of Competition □ In Compe Additional Information: <u>UFC</u>	Spe Bro Eight	δΩ ecimen ID:	S 0 0 7 2 3 2 3 0 9 SPECIMEN ID NO.	
To be completed and verified by collecto	r/validator:	. (
Collector's Name: Jim Guens Validator's Name: Jim Guens Sport: DCO. MMA-UFC Optional On site Specimen Assessment: Specimen	Donor's Ge	n Date: ender: ★Male □ :	Female	
Validator Affidavit: I certify that I witnessed the d	lonor during the collection pro	cess The collection (ontainer and	
specimen remained in control of the donor throu				
XValidator's Signature	<u> </u>	15		
<u>Collector Affidavit:</u> I certify that the donor provide procedures. I further certify the specimen was giv to entity identified below.				
x	61615	1 <u>2,722</u> a Time		
XCollector's Signature	Date	Time	im/pm/	
Specimen to be released to:				
≽SMRTL (by hand delivery)				
Courier:	_Waybill/Airbill#	·		
Other:	·			
To be completed by Laboratory:				
Received By:				
Accessioner's Signature	date/time	Accessioner PRINT	Name	
Specimen Vial Seals Intact: 🛛 YES] NO			
To be completed by collector and ve	erified by donor: (not t	o be included on lat	o copy)	
Bory MacDonald				
Dondr's Name	Damada ID	н		

Dongr's Name

Donor's ID #

<u>Donor Affidavit</u>: I certify that I provided this specimen. The specimen was in my control until the collector packaged the specimen in the vials and applied the security seal(s). The information provided on this form and on the labels affixed to the specimen bottles are correct. I hereby authorize the testing laboratory to release the results of the test to the designated designee.

616/15

Donor's Signature



CONFIDENTIAL TEST REPORT

Christopher A. Eccles Attorney General of Nevada 555 E. Washington Ave., Suite 3900 Las Vegas, NV 89101

Program:	WADA Partial Menu	Collection Date:	6/6/2015
Lab ID:		Lab Receipt Date:	6/8/2015
Specimen ID:	S006205819	Report Date:	
Test type:	Out of competition	Orig. Report Date:	
Mission Ref#:	UFC189	Gender:	Male
Sport:	Mixed Martial Arts	Sample Matrix:	Urine
Discipline:	Mixed Martial Arts	pH:	7.7
Container:	A Bottle 297262-1	Specific Gravity:	1.006
		LH:	.7 mIU/mL

Analysis Requested: Specimen was analyzed for Anabolic Agents (S1); Peptide Hormones, Growth Factors and Related Substances (S2); Beta-2 Agonists (S3); Hormone and Metabolic Modulators (S4) and Diuretics and Other Masking Agents (S5) using GC/MS, LC/MS and Immunoassay test methods.
 Result: No Prohibited Substance(s) or Prohibited Method(s), or their Metabolite(s) or Marker(s) on the test menu were detected.

Unless otherwise noted the condition of the specimen was acceptable when received at the laboratory.

Endogenous Steroid Data (screen):							
Andro	Etio	DHEA	Epi	Test	T/E	5α-diol	5β-diol
580 ng/mL	690 ng/mL	28 ng/mL	14 ng/mL	14 ng/mL	1	17 ng/mL	82 ng/mL

Vinod Nair

Vinod Kair

Signature

Monday, June 15, 2015

Date

Certified By

Accredited by the World Anti-Doping Agency as compliant with the requirements of the World Anti-Doping Code.

Accredited by the American Association for Laboratory Accreditation as compliant with the requirements of ISO/IEC 17025, Testing Certificate 2500.01.



Sports Medicine Research & Testing 560 Arapeen Dr. Suite 150 Salt Lake City, UT 84108 Tel: +1 (801) 994 9454 Fax: +1 (801) 994 9455

CONFIDENTIAL TEST REPORT

Christopher A. Eccles Attorney General of Nevada 555 E. Washington Ave., Suite 3900 Las Vegas, NV 89101

Program:	Complete Blood Count	Collection Date:	6/6/2015
Lab ID:	297236	Lab Receipt Date:	6/8/2015
Specimen ID:	S006205827	Report Date:	6/9/2015
Test type:	Out of competition	Orig. Report Date:	
Mission Ref#:	UFC 189	Gender:	Male
Sport:	Mixed Martial Arts	Sample Matrix:	Blood
Discipline:	Mixed Martial Arts		
Container:	Whole Blood Tube - A 297236-1		

Analysis Requested: Specimen was analyzed for hematological parameters.

Unless otherwise noted the condition of the specimen was acceptable when received at the laboratory.

Parameter	Analysis
Instrument: XT-2000i #1	Date: 8-Jun-2015 13:21
Red blood cells	4.81 10^6/uL
Hemoglobin	14.7 g/dL
Hematocrit	42.8 %
Mean corpuscular volume	89.0 fL
Mean corpuscular hemoglobin	30.6 pg
Mean corpuscular hb concentr.	34.3 g/dL
Reticulocyte percentage	0.77 %
Reticulocyte number	0.0370 10^6/uL
RDW Standard Deviation	41.3 fL
Immature Reticulocyte Fraction	7.1 %
Off-Score	94.4

Judy Field

July 2. Juil

Tuesday, June 09, 2015

Date

Certified By

Signature

Accredited by the World Anti-Doping Agency as compliant with the requirements of the World Anti-Doping Code.

Accredited by the American Association for Laboratory Accreditation as compliant with the requirements of ISO/IEC 17025, Testing Certificate 2500.01.



CONFIDENTIAL TEST REPORT

Christopher A. Eccles Attorney General of Nevada 555 E. Washington Ave., Suite 3900 Las Vegas, NV 89101

Program:	Human Growth Hormone	Collection Date:	6/6/2015	
Lab ID:	297238	Lab Receipt Date:	6/8/2015	
Specimen ID:	S007232309	Report Date:	6/12/2015	
Test type:	Out of competition	Orig. Report Date:		
Mission Ref#:	UFC 189	Gender:	Male	
Sport:	Mixed Martial Arts	Sample Matrix:	Blood	
Discipline:	Mixed Martial Arts			
Container:	Serum Separator Tube - A 297238-1			
 Analysis Requested: Specimen was analyzed for Peptide Hormones, Growth Factors and Related Substances (S2) including Growth Hormone (hGH) using Immunoassay test methods. Result: No Prohibited Substance(s) or Prohibited Method(s), or their Metabolite(s) or Marker(s) on the test menu were detected. 				
Unless other	vise noted the condition of the specime	en was acceptable when receive	ed at the laboratory.	
hGH Data:				

hGH ratio .712 X:1 hGH Kit 2

Judy Field

Jung 2. Juil

Friday, June 12, 2015

Date

Certified By

Signature

Accredited by the World Anti-Doping Agency as compliant with the requirements of the World Anti-Doping Code.

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Drug Testing Custody and Control Form			
Testing Authority: Newade Athletic Commission XCUrine Blood Passport Blood hGH Specimen ID: XCUrine Blood Passport Blood hGH Specimen ID: XCUrine In Competition Pre Fight S006143630 Additional Information: UFC 189 Post Fight Specimen ID:			
To be completed and verified by collector/validator: Collector's Name:			
X			
procedures. I further certify the specimen was given to me by the donor and was packaged and sealed and will be given to entity identified below. X			
□ SMRTL (by hand delivery) & Courier:			
To be completed by Laboratory:			
Received By:			
Specimen Vial Seals Intact: YES NO			
To be completed by collector and verified by donor: (not to be included on lab copy)			

Lawler

Donor's ID #

Donor's Name

<u>Donor Affidavit</u>: I certify that I provided this specimen. The specimen was in my control until the collector packaged the specimen in the vials and applied the security seal(s). The information provided on this form and on the labels affixed to the specimen bottles are correct. I hereby authorize the testing laboratory to release the results of the test to the designated designee.

6.5. Date Donor's Signature

Drug Testing Custody and Control Form			
Testing Authority: Neural Athletic Commission In Urine Vine Vine Vine In Competition In Competition In Competition In Competition In Competition In Competition In Competition Pre Fight Solutional Information: VFC In Competition Post Fight Specimen ID: Specimen ID: Specimen ID: Specimen ID:			
To be completed and verified by collector/validator: Collector's Name: Image: Collector/validator: Validator's Name: Image: Collector/validator: Validator's Name: Image: Collector/validator: Sport: Image: Collector/validator: Optional On site Specimen Assessment: Specific Gravity:			
Validator Affidavit: I certify that I witnessed the donor during the collection process. The collection container and specimen remained in constant view of the donor and me. X			
Collector Affidavit: I certify that the donor provided the specimen on this date in accordance with specified collection procedures. I further certify the specimen was given to me by the donor and was packaged and sealed and will be given to entity identified below $X = \underbrace{Collector's Signature}_{Date} = \underbrace{Collector's Signature}_{Date} = \underbrace{Collector's Signature}_{Time}$			
□ SMRTL (by hand delivery) ACourier: <u>Fed. F.X</u> Waybill/Airbill# <u>803412416679</u> □ Other:			
To be completed by Laboratory: Received By:			
Accessioner's Signature date/time Accessioner PRINT Name			
Specimen Vial Seals Intact: 🛛 YES 🔲 NO			
To be completed by collector and verified by donor: (not to be included on lab copy)			

Robert Lawler Donor's Name

Donor's ID #

<u>Donor Affidavit</u>: I certify that I provided this specimen. The specimen was in my control until the collector packaged the specimen in the vials and applied the security seal(s). The information provided on this form and on the labels affixed to the specimen bottles are correct. I hereby authorize the testing laboratory to release the results of the test to the designated designee.

Donor's Signature

Date

Drug Testing Custody and Control Form				
Testing Authority: Neurada Athletic Omnission □ Urine □ Blood Passport & Blood hGH Specimen ID: Image: Specimen ID: X Out of Competition □ In Competition □ Pre Fight S006205876 Additional Information: UFC Image: Specimen ID: Specimen ID:				
To be completed and verified by collector/validator: Collector's Name: IN GWETNSey Collection Date: 6/5/15 Validator's Name: IN GWETNSey Donor's Gender: Male Female Sport: Don site Specimen Assessment: Specific Gravity: DH: DH:				
Validator Affidavit: I certify that I witnessed the donor during the collection process. The collection container and specimen remained in constant view of the donor and me. X				
<u>Collector Affidavit:</u> I certify that the donor provided the specimen on this date in accordance with specified collection procedures. I further certify the specimen was given to me by the donor and was packaged and sealed and will be given to entity identified below.				
Collector's Signature Date Time Specimen to be released to: SMRTL (by hand delivery) Courier: Fee Ex Waybill/Airbill# 8034 124 6679 Other:				
To be completed by Laboratory: Received By:				
Accessioner's Signature date/time Accessioner PRINT Name				
Specimen Vial Seals Intact: 🛛 YES 🖾 NO				
To be completed by collector and verified by donor: (not to be included on lab copy)				
Donor's Name Donor's ID #				

<u>Donor Affidavit</u>: I certify that I provided this specimen. The specimen was in my control until the collector packaged the specimen in the vials and applied the security seal(s). The information provided on this form and on the labels affixed to the specimen bottles are correct. I hereby authorize the testing laboratory to release the results of the test to the designated designee.

By signing below, I hereby accept the risk of adverse public notice of the test results, embarrassment, criticism, financial loss or other action, and expressly waive any claims for damages as a result thereof. Public release of the test results does not impose liability for defamilation or constitute a ground for recovery in a civil action.

 $\langle \circ \rangle$ Donor's Signature Date

Х



CONFIDENTIAL TEST REPORT

Christopher A. Eccles Attorney General of Nevada 555 E. Washington Ave., Suite 3900 Las Vegas, NV 89101

Program:	WADA Partial Menu	Collection Date:	6/5/2015
Lab ID:	297265	Lab Receipt Date:	6/6/2015
Specimen ID:	S006143630	Report Date:	6/18/2015
Test type:	Out of competition	Orig. Report Date:	
Mission Ref#:	UFC189	Gender:	Male
Sport:	Mixed Martial Arts	Sample Matrix:	Urine
Discipline:	Mixed Martial Arts	pH:	7.6
Container:	A Bottle 297265-1	Specific Gravity:	1.018
		LH:	64.2 mIU/mL

Analysis Requested: Specimen was analyzed for Anabolic Agents (S1); Peptide Hormones, Growth Factors and Related Substances (S2); Beta-2 Agonists (S3); Hormone and Metabolic Modulators (S4) and Diuretics and Other Masking Agents (S5) using GC/MS, LC/MS and Immunoassay test methods.
 Result: No Prohibited Substance(s) or Prohibited Method(s), or their Metabolite(s) or Marker(s) on the test menu were detected.

Unless otherwise noted the condition of the specimen was acceptable when received at the laboratory.

Endogenous Steroid Data (screen):							
Andro	Etio	DHEA	Epi	Test	T/E	5α-diol	5β-diol
5600 ng/mL	4600 ng/mL	31 ng/mL	17 ng/mL	51 ng/mL	3	210 ng/mL	680 ng/mL

Vinod Nair

Vinod Kair

Thursday, June 18, 2015

Date

Certified By

Signature

Accredited by the World Anti-Doping Agency as compliant with the requirements of the World Anti-Doping Code.

Accredited by the American Association for Laboratory Accreditation as compliant with the requirements of ISO/IEC 17025, Testing Certificate 2500.01.

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CONFIDENTIAL TEST REPORT

Christopher A. Eccles Attorney General of Nevada 555 E. Washington Ave., Suite 3900 Las Vegas, NV 89101

Program:	Complete Blood Count	Collection Date:	6/5/2015
Lab ID:	297100	Lab Receipt Date:	6/6/2015
Specimen ID:	S008083206	Report Date:	6/9/2015
Test type:	Out of competition	Orig. Report Date:	
Mission Ref#:	UFC 189	Gender:	Male
Sport:	Mixed Martial Arts	Sample Matrix:	Blood
Discipline:	Mixed Martial Arts		
Container:	Whole Blood Tube - A 297100-1		

Analysis Requested: Specimen was analyzed for hematological parameters.

Unless otherwise noted the condition of the specimen was acceptable when received at the laboratory.

Parameter	Analysis
Instrument: XT-2000i #1	Date: 6-Jun-2015 18:28
Red blood cells	4.54 10^6/uL
Hemoglobin	13.7 g/dL
Hematocrit	41.9 %
Mean corpuscular volume	92.3 fL
Mean corpuscular hemoglobin	30.2 pg
Mean corpuscular hb concentr.	32.7 g/dL
Reticulocyte percentage	1.63 %
Reticulocyte number	0.0740 10^6/uL
RDW Standard Deviation	38.6 fL
Immature Reticulocyte Fraction	8.6 %
Off-Score	60.4

Judy Field

July 2. Juil

Tuesday, June 09, 2015

Date

Certified By

Signature

Accredited by the World Anti-Doping Agency as compliant with the requirements of the World Anti-Doping Code.

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CONFIDENTIAL TEST REPORT

Christopher A. Eccles Attorney General of Nevada 555 E. Washington Ave., Suite 3900 Las Vegas, NV 89101

Program:	Human Growth Hormone	Collection Date:	6/5/2015		
Lab ID:	297102	Lab Receipt Date:	6/6/2015		
Specimen ID:	S006205876	Report Date:	6/12/2015		
Test type:	Out of competition	Orig. Report Date:			
Mission Ref#:	UFC 189	Gender:	Male		
Sport:	Mixed Martial Arts	Sample Matrix:	Blood		
Discipline:	Mixed Martial Arts				
Container:	Serum Separator Tube - A 297102-1				
Analysis Requested:	Specimen was analyzed for Peptide I	Hormones, Growth Factors and	Related Substances (S2)		
· · · · · · · · · · · · · · · · · · ·	including Growth Hormone (hGH) us				
Result:	No Prohibited Substance(s) or Prohibited Method(s), or their Metabolite(s) or Marker(s) on the test menu were detected.				
Unless other	wise noted the condition of the specim	en was acceptable when receive	ed at the laboratory.		
hGH Data:					

hGH ratio .260 X:1 hGH Kit 2

Judy Field

Jung 2. Juil

Friday, June 12, 2015

Date

Certified By

Signature

Accredited by the World Anti-Doping Agency as compliant with the requirements of the World Anti-Doping Code.

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Collection Event Report

TO: Bob Bennett
FROM: Chris Guinty
DATE: June 12, 2015
RE: José Aldo Collection – Brazil

Mr. Bennett,

Per our conversation June 11, 2015, below is a report regarding the attempted collection of a urine sample for José Aldo at Upper Gym, Rua Marques de Abrantes 96, Flamengo, Rio di Janeiro, Brazil.

- 1. Drug Free Sport was engaged by the Nevada State Athletic Commission (NSAC) to perform an out of competition doping collection in Brazil for José Aldo.
- Two options were presented to the NSAC regarding Drug Free Sport's ability to conduct a urine collection in Brazil: (1) utilize a local DCO that is a contractor for a partner of Drug Free Sport, or (2) use a Drug Free Sport staff member who has a Brazilian work visa to travel to Brazil and complete the collection in conjunction with a local doping control officer (DCO) that could help legally ship samples out of Brazil.
- 3. For quality purposes, the NSAC authorized the use of a Drug Free Sport staff member in conjunction with a local DCO.
- 4. Drug Free Sport staff member Ben Mosier, Director of Professional Sports Drug Testing, was assigned to arrange and complete the test. Ben Mosier, a professionally trained and certified drug testing collector, had previously conducted thousands of drug testing collections across numerous countries without incident or appeal.
- 5. Ben Mosier has a current work visa issued by the Brazilian consulate in Chicago, Illinois in 2012 to conduct business in Brazil. The application letter dated June 18, 2012, indicated that "Benjamin is a professional sports program manager for the National Center for Drug Free Sport, a company that provides drug testing services for Minor League Baseball, as well as many other professional sports associations." The letter further details that Benjamin would be meeting with players to "complete a drug test after the drug tests have been completed, Benjamin will ship the urine samples back to the United States for analysis. All shipping will be done with assistance from the Brazilian Agency of Anti Doping (ABA) in order to be in full compliance of Brazilian shipping procedures." Ben was issued a ten year VITEM II visa based on this application and relied on its authenticity to travel to Brazil to test José Aldo. It appears now that a VITEM V visa is required for such services.

- 6. Prior to departure for the José Aldo test, Ben Mosier contacted a high ranking anti-doping official in Brazil for counsel regarding collecting and shipping samples under applicable laws in Brazil. This internationally regarded expert on anti-doping, with years of experience in Brazilian anti-doping, arranged to have a local DCO accompany Ben Mosier to ensure all procedures were carried out in accordance with Brazilian rules and regulations. Names of local officials are withheld from this report to avoid any potential retribution or future conflicts of interest.
- 7. Ben Mosier arrived in Brazil on June 10, 2015 at approximately 10:00 am.
- 8. On June 10 at approximately 2:00 pm, Ben Mosier attempted to contact José Aldo at the number provided by the NSAC, to conduct a no notice test on Mr. Aldo per approved protocol by the NSAC. The Brazilian MMA Athletic Commission was not contacted in advance of this testing attempt, as best practice requires no outside communication of testing attempt to third parties to protect the confidentiality of the testing event. José Aldo's phone was unanswered and no voicemail system was available, a text message was sent following the call. Ben Mosier then called the alternate contact provided by the NSAC, leaving a voicemail and sending a text message to José Aldo's manager, Andre Poderneiras. Mr. Poderneiras called Ben Mosier back within a few minutes and stated he would attempt to locate José Aldo to arrange test. Mr. Poderneiras was unable to contact José Aldo to arrange testing the evening of June 10 and advised Aldo would be at the training facility the following morning at 10:30 am and test could be conducted at that time.
- 9. With coordination from José Aldo's manager Andre Poderneiras, Ben Mosier arrived at Upper Gym at approximately 9:30 am on June 11 to complete the sample collection.
- 10. José Aldo arrived to the gym at approximately 10:30 am on June 11 and an anti-doping test was initiated.
- 11. José Aldo was reportedly very cooperative during the process.
- 12. After the urine sample was collected, but prior to processing the sample for shipment, José Aldo's trainer stopped the collection until Mr. Poderneiras arrived. Mr. Poderneiras arrived to the gym at approximately 11:30 am. Mr. Poderneiras proceeded to contact the Brazilian MMA Athletic Commission to inform them of the test.
- 13. Just after 11:30 am, an off-duty Brazilian federal police officer who was on-site training as a MMA fighter confiscated Ben Mosier's passport and claimed he had an incorrect work visa. The officer said he was authorized to conduct business, but not collect urine samples (see comment above about the visa application). The federal police officer threatened to arrest and deport Ben Mosier for unauthorized performance of work.
- 14. While detaining Ben Mosier at the training facility, the federal police officer relayed a story of being detained in the United States when returning to Brazil following a previous fight. The officer claimed to Ben Mosier that he was detained by law enforcement officials for 24 hours and was treated poorly, noting that he was treating Ben Mosier in a more pleasant manner. The officer made it a point to advise that this detainment was not revenge for his past detainment, and he had the right to transport Ben to a local detention facility for processing.
- 15. A representative from the Brazilian MMA Athletic Commission, Christiano Sampaio, arrived at the facility and halted the test. Mr. Sampaio spoke with Chris Guinty at Drug Free Sport to

arrange for a Brazilian MMA Athletic Commission DCO to travel to the gym on June 12 to complete the test while Ben Mosier monitored.

- 16. The local Brazilian DCO that was assigned to assist Ben Mosier and Drug Free Sport arrived on site to help with the situation and indicated to Ben Mosier that he had done nothing wrong and was authorized to conduct the test. The local DCO argued with Christiano Sampaio and the federal authorities involved on their authority to complete the test as a Brazilian resident and nationally certified DCO, however Sampio refused to let the local DCO (or Ben Mosier) proceed with any testing despite their employment as a local doping control officer. It was reported only a Brazilian MMA Athletic Commission DCO would be allowed to collect the sample.
- 17. Ben Mosier instructed José Aldo to discard the collected sample because both Ben and José lost control of the sample when Ben was escorted to a holding room.
- 18. Ben Mosier spoke with various parties (Drug Free Sport, UFC local representatives, NSAC, etc.) to report on the situation and obtain direction.
- 19. Ben Mosier reported at 1:39 pm CDT to Chris Guinty that immigration control had been dispatched to his location to escort him out of the country. Ben Mosier continued to explain to present authorities that he had a valid work visa issued in 2012 (expiring 2022) from the Brazilian consulate in Chicago. The federal police officer continued threatening him with arrest and confiscation of his phone, and refused Ben access to his computer to demonstrate proof of his work related documents from the Brazilian consulate. Ben was told he will not be allowed to remain in Brazil for the test that is to occur with the Brazilian MMA Athletic Commission DCO on June 12. Brazilian immigration officials reported to the training facility and reviewed his paperwork and deemed he was allowed him to stay in the country and participate in the collection the following day. The immigration official advised if Ben returned to the country in the future he would need to pay an administrative fee to rectify his visa issue.
- 20. Following resolution with immigration officials, collection was scheduled to occur on June 12 at the training facility with José Aldo and the Brazilian MMA Athletic Commission DCO between 8:30 9:00 am local time, under the supervision of Ben Mosier.
- 21. Ben Mosier arrived to the training facility on June 12 at 7:30 am. José Aldo did not arrive to the training facility for collection as scheduled, and it was reported that he was at the US Embassy obtaining his US Visa to travel for his upcoming fight. José Aldo was not able to be contacted during his absence from the training facility.
- 22. At 8:54 am CDT on June 12, Chris Guinty spoke with Christiano Sampaio about the importance of Aldo taking the test immediately, due to length of time that had elapsed from testing notification. Christiano Sampio advised at that time his deadline for shipping would be 12:00 pm local time to ensure the sample was transported via courier to the airport for flight to the United States. During continued wait for José Aldo to arrive to the training facility to commence collection process, Christiano Sampio later changed this shipping cutoff time to 2:00 pm local time, with no explanation provided as to why later time was now possible.
- 23. At approximately 11:40 am local time, José Aldo arrived to the training facility and the test attempt was initiated. José Aldo provided a urine specimen at approximately 11:49 am in the restroom, upon closing the beaker lid he dropped the collection beaker and spilled the sample in its entirety. José Aldo successfully provided an adequate volume specimen at 12:29 pm which

was packaged by the Brazilian MMA Athletic Commission DCO without taking any adequacy measurements. At approximately 12:45 pm Ben Mosier and Christiano Sampio transported the specimen via taxi to the airport and consigned the specimen to World Courier for shipment to laboratory at 1:40 pm.

24. Upon completion of the testing event, the Brazilian MMA Athletic Commission DCO requested an autograph from José Aldo in a magazine he had brought to the collection event and to take a picture with José Aldo; both requests were granted. Executive Director Bob Bennett requested Drug Free Sports to conduct a random performance enhancing drug test regarding Mr. Aldo. The test was requested based on Mr. Aldo's scheduled championship fight with Mr. Connor McGregor. The report memorializes the information provide by Mr. Ben Mosier, Drug Free Sport Director of Professional Sports Drug Testing.



CONFIDENTIAL TEST REPORT

Christopher A. Eccles Attorney General of Nevada 555 E. Washington Ave., Suite 3900 Las Vegas, NV 89101

Program:	WADA Partial Menu	Collection Date:	6/12/2015
Lab ID:	298396	Lab Receipt Date:	6/15/2015
Specimen ID:	480405	Report Date:	6/18/2015
Test type:	Out of competition	Orig. Report Date:	
Mission Ref#:	N/A	Gender:	Male
Sport:	Mixed Martial Arts	Sample Matrix:	Urine
Discipline:	Mixed Martial Arts	pH:	7.0
Container:	A Bottle 298396-1	Specific Gravity:	1.005
		LH:	1.9 mIU/mL

Analysis Requested: Specimen was analyzed for Anabolic Agents (S1); Peptide Hormones, Growth Factors and Related Substances (S2); Beta-2 Agonists (S3); Hormone and Metabolic Modulators (S4) and Diuretics and Other Masking Agents (S5) using GC/MS, LC/MS and Immunoassay test methods.
 Result: No Prohibited Substance(s) or Prohibited Method(s), or their Metabolite(s) or Marker(s) on the test menu were detected.

Unless otherwise noted the condition of the specimen was acceptable when received at the laboratory.

Endogenous Steroid Data (screen):							
Andro	Etio	DHEA	Epi	Test	T/E	5α-diol	5β-diol
800 ng/mL	840 ng/mL	13 ng/mL	11 ng/mL	4.7 ng/mL	.45	24 ng/mL	71 ng/mL

Vinod Nair

Vinod Kair

Thursday, June 18, 2015

Date

Certified By

Signature

Accredited by the World Anti-Doping Agency as compliant with the requirements of the World Anti-Doping Code.

Accredited by the American Association for Laboratory Accreditation as compliant with the requirements of ISO/IEC 17025, Testing Certificate 2500.01.

The results contained herein relate only to the items tested. This report shall not be reproduced, except in full, without the expressed written consent of the Laboratory.

Drug Testing Custody and Control Form
Testing Authority: Nevada Athletic Commission AUrine Blood Passport Blood hGH XOut of Competition In Competition Additional Information: UFC 189 SPECIMEN 10 NO.
To be completed and verified by collector/validator:
Collector's Name: Jim Guemse/ Collection Date: Guerris Validator's Name: Jim Guerris Donor's Gender: Male Female Sport: Domor's Gender: Male Female Optional On site Specimen Assessment: Specific Gravity: Optional On site Specimen Assessment: Specific Gravity: Optional On site Specimen Assessment:
Validator Affidavit: I certify that I witnessed the donor during the collection process. The collection container and
specimen remained in control of the donor throughout this process and remained in constant view of the donor and me. X
<u>Collector Affidavit:</u> I certify that the donor provided the specimen on this date in accordance with specified collection
procedures. I further certify the specimen was given to me by the donor and was packaged and sealed and will be given to entity identified below.
x <u>Confectors Signature</u> $6/17/15/12:47$ ampm Date Time
Specimen to be released to:
SMRTL (by hand delivery) Courier: Waybill/Airbill# Other:
To be completed by Laboratory:
Received By:
Specimen Vial Seals Intact: YES NO
To be completed by collector and verified by donor: (not to be included on lab copy)
Robert Lawler
Donor's Name Donor's ID #

By signing below, I hereby accept the risk of adverse public notice of the test results, embarrassment, criticism, financial loss or other action, and expressly waive any claims for damages as a result thereof. Public release of the test results does not impose the bility for defamation of constitute a ground for recovery in a civil action.

Donor's Signature Date

Drug Testing Custody and Control Form
Testing Authority: Nevada Athletic Commission In Urine Blood Passport Blood hGH Specimen ID: Specimen ID: Solut of Competition In Competition Additional Information: WFC
To be completed and verified by collector/validator: Collector's Name: In GVETSe/ Validator's Name: In GVETSe/ Sport: PD - MMA Optional On site Specimen Assessment: Specific Gravity:
<u>Validator Affidavit:</u> I certify that I witnessed the donor during the collection process. The collection container and specimen remained in control of the donor throughout this process and remained in constant view of the donor and me. X
<u>Collector Affidavit:</u> I certify that the donor provided the specimen on this date in accordance with specified collection procedures. I further certify the specimen was given to me by the donor and was packaged and sealed and will be given to entity identified below. $X = \frac{\int_{Date} \sqrt{\frac{1}{15} \int_{Time} \frac{1207}{15}} am pm}{Date}$
Specimen to be released to: SMRTL (by hand delivery) Courier: Waybill/Airbill# Other:
To be completed by Laboratory: Received By: Accessioner's Signature date/time Accessioner PRINT Name
Specimen Vial Seals Intact: YES NO
To be completed by collector and verified by donor: (not to be included on lab copy) Robert Lawler Donor's Name Donor's ID #

By signing below, I hereby accept the risk of adverse public notice of the test results, embarrassment, criticism, financial loss or other action, and expressly waive any claims for damages as a result thereof. Public release of the test results does not impose liability for defanation or constitute a ground for recovery in a civil action.

Donor's Signature Date

Drug Testing Custody and Control Form

Testing Authority: <u>Nevado Athlefic Commission</u> Durine Delood Passport & Blood hGH Dut of Competition D In Competition Additional Information: <u>MFC 189</u> Deltice Deltice D
To be completed and verified by collector/validator: Collector's Name: Im Guernser Validator's Name: Im Guernser Sport: Down Ser Optional On site Specimen Assessment: Specific Gravity:
Validator Affidavit: I certify that I witnessed the donor during the collection process. The collection container and specimen remained in control of the donor throughout this process and remained in constant view of the donor and me. X Image: Collection control of the donor throughout this process and remained in constant view of the donor and me. X Image: Collection control of the donor throughout this process and remained in constant view of the donor and me. Date Image: Collection container and the donor and me.
Collector Affidavit: I certify that the donor provided the specimen on this date in accordance with specified collection procedures. I further certify the specimen was given to me by the donor and was packaged and sealed and will be given to entity identified below x
To be completed by Laboratory: Received By: Accessioner's Signature date/time Accessioner PRINT Name Specimen Vial Seals Intact: YES NO
To be completed by collector and verified by donor: (not to be included on lab copy)
Robert Lawler
Donor's Name Donor's ID #
Donor Affidavit: I certify that I provided this specimen. The specimen was in my control until the collector packaged the

<u>Donor Affidavit</u>: I certify that I provided this specimen. The specimen was in my control until the collector packaged the specimen in the vials and applied the security seal(s). The information provided on this form and on the labels affixed to the specimen bottles are correct. I hereby authorize the testing laboratory to release the results of the test to the designated designee.

By signing below, I hereby accept the risk of adverse public notice of the test results, embarrassment, criticism, financial loss or other action, and expressly waive any claims for damages as a result thereof. Public release of the test results does not impose liability for defamation of constitute a ground for recovery in a civil action.

0'1 Donor's Signature Date



CONFIDENTIAL TEST REPORT

Christopher A. Eccles Attorney General of Nevada 555 E. Washington Ave., Suite 3900 Las Vegas, NV 89101

0	WADA Partial Menu	Collection Date:	6/17/2015
Lab ID:	299475	Lab Receipt Date:	6/18/2015
Specimen ID:	S007232390	Report Date:	6/30/2015
Test type:	Out of competition	Gender:	Male
Mission Ref#:	UFC189	Sample Matrix:	Urine
Sport:	Mixed Martial Arts	pH:	6.5
Discipline:	Mixed Martial Arts	Specific Gravity:	1.007
Container:	A Bottle 299475-1	LH:	12.9 mIU/mL

Analysis Requested: Specimen was analyzed for Anabolic Agents (S1); Peptide Hormones, Growth Factors and Related Substances (S2); Beta-2 Agonists (S3); Hormone and Metabolic Modulators (S4) and Diuretics and Other Masking Agents (S5) using GC/MS, LC/MS and Immunoassay test methods. Result: No Prohibited Substance(s) or Prohibited Method(s), or their Metabolite(s) or Marker(s) on the test menu were detected.

Unless otherwise noted the condition of the specimen was acceptable when received at the laboratory.

Endogenous Steroid Data (screen):							
Andro	Etio	DHEA	Epi	Test	T/E	5α-diol	5β-diol
1200 ng/mL	1800 ng/mL	12 ng/mL	8.3 ng/mL	15 ng/mL	1.8	80 ng/mL	170 ng/mL

Thane Campbell

Manux / anne fill

Tuesday, June 30, 2015

Date

Certified By

Signature

Accredited by the World Anti-Doping Agency as compliant with the requirements of the World Anti-Doping Code.

Accredited by the American Association for Laboratory Accreditation as compliant with the requirements of ISO/IEC 17025, Testing Certificate 2500.01.

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CONFIDENTIAL TEST REPORT

Christopher A. Eccles Attorney General of Nevada 555 E. Washington Ave., Suite 3900 Las Vegas, NV 89101

Program:	Complete Blood Count	Collection Date:	6/17/2015
Lab ID:	299069	Lab Receipt Date:	6/18/2015
Specimen ID:	S007232382	Report Date:	6/19/2015
Test type:	Out of competition	Orig. Report Date:	
Mission Ref#:	UFC 189	Gender:	Male
Sport:	Mixed Martial Arts	Sample Matrix:	Blood
Discipline:	Mixed Martial Arts		
Container:	Whole Blood Tube - A 299069-1		

Analysis Requested: Specimen was analyzed for hematological parameters.

Unless otherwise noted the condition of the specimen was acceptable when received at the laboratory.

Parameter	Analysis
Instrument: XT-2000i #1	Date: 18-Jun-2015 13:38
Red blood cells	4.48 10^6/uL
Hemoglobin	13.4 g/dL
Hematocrit	41.6 %
Mean corpuscular volume	92.9 fL
Mean corpuscular hemoglobin	29.9 рд
Mean corpuscular hb concentr.	32.2 g/dL
Reticulocyte percentage	1.83 %
Reticulocyte number	0.0820 10^6/uL
RDW Standard Deviation	37.8 fL
Immature Reticulocyte Fraction	13.4 %
Off-Score	52.8

Judy Field

July 2. Juil

Friday, June 19, 2015

Date

Certified By

Signature

Accredited by the World Anti-Doping Agency as compliant with the requirements of the World Anti-Doping Code.

Accredited by the American Association for Laboratory Accreditation as compliant with the requirements of ISO/IEC 17025, Testing Certificate 2500.01.



CONFIDENTIAL TEST REPORT

Christopher A. Eccles Attorney General of Nevada 555 E. Washington Ave., Suite 3900 Las Vegas, NV 89101

Lab ID: Specimen ID: Test type: Mission Ref#: Sport:	Out of competition	Collection Date: Lab Receipt Date: Report Date: Gender: Sample Matrix:	6/18/2015 6/26/2015 Male	
-	Serum Separator Tube - A 299067-1			
 Analysis Requested: Specimen was analyzed for Peptide Hormones, Growth Factors and Related Substances (S2) including Growth Hormone (hGH) using Immunoassay test methods. Result: No Prohibited Substance(s) or Prohibited Method(s), or their Metabolite(s) or Marker(s) on the test menu were detected. Unless otherwise noted the condition of the specimen was acceptable when received at the laboratory. 				
hGH Data:				

hGH ratio .340 X:1 hGH Kit 1

Judy Field

Jung 2. Juil

Signature

Friday, June 26, 2015

Certified By

Date

Accredited by the World Anti-Doping Agency as compliant with the requirements of the World Anti-Doping Code.

Accredited by the American Association for Laboratory Accreditation as compliant with the requirements of ISO/IEC 17025, Testing Certificate 2500.01.

The results contained herein relate only to the items tested. This report shall not be reproduced, except in full, without the expressed written consent of the Laboratory.

Drug Testing	Custody and Co	ontrol Form	
Testing Authority: <u>Neurada</u> <u>A+R</u> AUrine Delood Passport Delood hGH XOut of Competition Delin Competition Additional Information: <u>UFC 189</u>	E POST FIGHT	ວິດ Specimen ID:	S 0 0 7 2 3 2 3 7 4 SPECIMEN ID NO.
To be completed and verified by collector Collector's Name: Jim Gwern Validator's Name: Jim Gwern Sport: <u>Pro MMA-UFC</u> Optional On site Specimen Assessment: Spec	Sey Collect	ction Date: s Gender: X Mal _ pH:	
Validator Affidavit: I certify that I witnessed the do specimen remained in control of the donor throug X	—		
<u>Collector Affidavit:</u> I certify that the donor provide procedures. I further certify the specimen was give to entity identified below	-	d was packaged and	sealed and will be given
X Collector's Signature Specimen to be released to: SMRTL (by hand delivery)	Date	<u>3:20</u> Time	am/pm
· · · · · · · · · · · · · · · · · · ·	Waybill/Airbill#		
To be completed by Laboratory: Received By:			
Accessioner's Signature	date/time	Accessioner l	PRINT Name
Specimen Vial Seals Intact: 🛛 YES 🗌] NO	×	
To be completed by collector and ve	rified by donor: (not to be included	on lab copy)
ROTY MacDonald			
Donor's Name	Donor	's ID #	· · · · ·
Donor Affidavit: I certify that I provided this specin	nen. The specimen was ir	n my control until the	e collector packaged the

specimen in the vials and applied the security seal(s). The information provided on this form and on the labels affixed to the specimen bottles are correct. I hereby authorize the testing laboratory to release the results of the test to the designated designee.

By signing below, I hereby accept the risk of adverse public notice of the test results, embarrassment, criticism, financial loss or other action, and expressly waive any claims for damages as a result thereof. Public release of the test results does not impose liability for defamation or constitute a ground for recovery in a civil action.

Date

Dopor's Signature

Drug Testing Custody and Control Form	
Testing Authority: Neval Athetic Conmission \Box Urine Blood Passport \Box Blood hGHSpecimen ID: \bigstar Out of Competition \Box In Competition \Box In Competition \Box Pre FightAdditional Information: $U \neq C$	4 3 2 Men 10 NG.
To be completed and verified by collector/validator:	
Collector's Name: Jim GwerAser Collection Date: 6/16/15	
Validator's Name: Jin Coverage Donor's Gender: Male 🗆 Female	
Sport: pro-MMA-UFC	
Optional On site Specimen Assessment: Specific Gravity:PH:	
/alidator Affidavit: I certify that I witnessed the donor during the collection process. The collection container and	
specimen remained in control of the donor throughout this process and remained in constant view of the donor and me.	•
\leq 61015	
Valietator's Signature Date	
Collector Affidavit: I certify that the donor provided the specimen on this date in accordance with specified collection procedures. I further certify the specimen was given to me by the donor and was packaged and sealed and will be given o entity identified below. Certector's Signature $ \begin{array}{c} \hline Certector's Signature \end{array} $	
pecimen to be feleased to: MSMRTL /by band dolivory)	
SMRTL (by hand delivery)	
D Other:	
To be completed by Laboratory: Received By:	-
Accessioner's Signature date/time Accessioner PRINT Name	
pecimen Vial Seals Intact: 🗆 YES 🖾 NO	
o be completed by collector and verified by donor: (not to be included on lab copy)	-
Roy Macbard	
Donor's Name Donor's ID #	

By signing below, I hereby accept the risk of adverse public notice of the test results, embarrassment, criticism, financial loss or other action, and expressly waive any claims for damages as a result thereof. Public release of the test results does not impose fiability for defamation or constitute a ground for recovery in a civil action.

Donor's Signature

Drug Testing C	ustody and	Control Form	
Testing Authority: <u>Nevada Athletic</u> D'Urine D'Blood Passport Blood hGH Out of Competition D'In Competit Additional Information: <u>UFC</u> 189	- Dro Fight	Specimen ID:	SOU7232424 SPECIMEN ID NO.
To be completed and verified by collector/v Collector's Name: Jin Gruppas Validator's Name: Jin Gruppas Sport: Do - MMA- UFC Optional On site Specimen Assessment: Specific	el Co Kel Dor	Illection Date: nor's Gender: XMa pH:	AGUS le ⊡Female
Validator Affidavit: I certify that I witnessed the dono specimen remained in control of the donor througho X			
Collector Affidavit: I certify that the donor provided t procedures. I further certify the specimen was given to to entity identified below. X	to me by the dono		l sealed and will be given
To be completed by Laboratory: Received By: Accessioner's Signature	date/time	Accessioner	PRINT Name
Specimen Vial Seals Intact: 🗆 YES 🗆 N			
To be completed by collector and verif Rory MacDanala			on lab copy)
/ Donor's Name		onor's ID #	Ψ.
<u>Donor Affidavit</u> : I certify that I provided this specimen			e collector packaged the

specimen in the vials and applied the security seal(s). The information provided on this form and on the labels affixed to the specimen bottles are correct. I hereby authorize the testing laboratory to release the results of the test to the designated designee.

By signing below, I hereby accept the risk of adverse public notice of the test results, embarrassment, criticism, financial loss or other action, and expressly waive any claims for damages as a result thereof. Public release of the test results does not impose liability for defamation or constitute a ground for recovery in a civil action.

Donor's Signature

6/16/15

Date



CONFIDENTIAL TEST REPORT

Christopher A. Eccles Attorney General of Nevada 555 E. Washington Ave., Suite 3900 Las Vegas, NV 89101

Program:	WADA Partial Menu	Collection Date:	6/16/2015
Lab ID:	299476	Lab Receipt Date:	6/18/2015
Specimen ID:	S007232374	Report Date:	6/30/2015
Test type:	Out of competition	Gender:	Male
Mission Ref#:	UFC189	Sample Matrix:	Urine
Sport:	Mixed Martial Arts	pH:	7.1
Discipline:	Mixed Martial Arts	Specific Gravity:	1.003
Container:	A Bottle 299476-1	LH:	.2 mIU/mL

Analysis Requested: Specimen was analyzed for Anabolic Agents (S1); Peptide Hormones, Growth Factors and Related Substances (S2); Beta-2 Agonists (S3); Hormone and Metabolic Modulators (S4) and Diuretics and Other Masking Agents (S5) using GC/MS, LC/MS and Immunoassay test methods.
 Result: No Prohibited Substance(s) or Prohibited Method(s), or their Metabolite(s) or Marker(s) on the test menu were detected.

Unless otherwise noted the condition of the specimen was acceptable when received at the laboratory.

Endogenous	Steroid Data ((screen):					
Andro	Etio	DHEA	Epi	Test	T/E	5α-diol	5β-diol
320 ng/mL	390 ng/mL	4 ng/mL	6.8 ng/mL	9.2 ng/mL	1.4	22 ng/mL	48 ng/mL

Thane Campbell

Manux / anne fill

Tuesday, June 30, 2015

Date

Certified By

Signature

Accredited by the World Anti-Doping Agency as compliant with the requirements of the World Anti-Doping Code.

Accredited by the American Association for Laboratory Accreditation as compliant with the requirements of ISO/IEC 17025, Testing Certificate 2500.01.

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CONFIDENTIAL TEST REPORT

Christopher A. Eccles Attorney General of Nevada 555 E. Washington Ave., Suite 3900 Las Vegas, NV 89101

Program:	Complete Blood Count	Collection Date:	6/16/2015
Lab ID:	299066	Lab Receipt Date:	6/18/2015
Specimen ID:	S007232432	Report Date:	6/19/2015
Test type:	Out of competition	Orig. Report Date:	
Mission Ref#:	UFC 189	Gender:	Male
Sport:	Mixed Martial Arts	Sample Matrix:	Blood
Discipline:	Mixed Martial Arts		
Container:	Whole Blood Tube - A 299066-1		

Analysis Requested: Specimen was analyzed for hematological parameters.

Unless otherwise noted the condition of the specimen was acceptable when received at the laboratory.

Parameter	Analysis
Instrument: XT-2000i #1	Date: 18-Jun-2015 13:35
Red blood cells	4.66 10^6/uL
Hemoglobin	14.4 g/dL
Hematocrit	42.2 %
Mean corpuscular volume	90.6 fL
Mean corpuscular hemoglobin	30.9 pg
Mean corpuscular hb concentr.	34.1 g/dL
Reticulocyte percentage	0.71 %
Reticulocyte number	0.0331 10^6/uL
RDW Standard Deviation	42.2 fL
Immature Reticulocyte Fraction	7.7 %
Off-Score	93.4

Judy Field

July 2. Juil

Friday, June 19, 2015

Date

Certified By

Signature

Accredited by the World Anti-Doping Agency as compliant with the requirements of the World Anti-Doping Code.

Accredited by the American Association for Laboratory Accreditation as compliant with the requirements of ISO/IEC 17025, Testing Certificate 2500.01.



CONFIDENTIAL TEST REPORT

Christopher A. Eccles Attorney General of Nevada 555 E. Washington Ave., Suite 3900 Las Vegas, NV 89101

Program: Lab ID:	Human Growth Hormone	Collection Date: Lab Receipt Date:	
Specimen ID:		Report Date:	
1	Out of competition	=	Male
Mission Ref#:	UFC 189	Sample Matrix:	Blood
Sport:	Mixed Martial Arts	-	
Discipline:	Mixed Martial Arts		
Container:	Serum Separator Tube - A 299068-1		
Result:	Specimen was analyzed for Peptide Horn including Growth Hormone (hGH) using No Prohibited Substance(s) or Prohibited test menu were detected. vise noted the condition of the specimen	Immunoassay test methods. d Method(s), or their Metabo	plite(s) or Marker(s) on the
GH Data:			
III Dutu.			

hGH ratio .407 X:1 hGH Kit 1

Judy Field

Jung 2. Juil

Friday, June 26, 2015

Date

Certified By

hG

Signature

Accredited by the World Anti-Doping Agency as compliant with the requirements of the World Anti-Doping Code.

Accredited by the American Association for Laboratory Accreditation as compliant with the requirements of ISO/IEC 17025, Testing Certificate 2500.01.

The results contained herein relate only to the items tested. This report shall not be reproduced, except in full, without the expressed written consent of the Laboratory.

Drug Testing Custody and Control Form
Testing Authority: Neuroda AttaletaCondition X Urine \square Blood Passport \square Blood hGHSpecimen ID: \square Out of Competition X In Competition \square Pre Fight \square So 0 6 2 0 5 5 5 3Additional Information: \square UFC 189 \square Post Fight \square So 0 6 2 0 5 5 5 3
To be completed and verified by collector/validator: Collector's Name: Image: Collector / validator: Validator's Name: Image: Collector / validator: Sport: Collection Date: Optional On site Specimen Assessment: Specific Gravity:
Validator Affidavit: I certify that I witnessed the donor during the collection process. The collection container and specimen remained in control of the donor throughout this process and remained in constant view of the donor and me. X
<u>Collector Affidavit:</u> I certify that the donor provided the specimen on this date in accordance with specified collection procedures. I further certify the specimen was given to me by the donor and was packaged and sealed and will be given to entity identified below. X
Courier: Waybill/Airbill# Other: To be completed by Laboratory:
Received By:
To be completed by collector and verified by donor: (not to be included on lab copy)
Donor's Name Donor's ID # Donor Affidavit: I certify that I provided this specimen. The specimen was in my control until the collector packaged the specimen in the vials and applied the security seal(s). The information provided on this form and on the labels affixed to

specimen in the vials and applied the security seal(s). The information provided on this form and on the labels affixed to the specimen bottles are correct. I hereby authorize the testing laboratory to release the results of the test to the designated designee.

By signing below, I hereby accept the risk of adverse public notice of the test results, embarrassment, criticism, financial loss or other action, and expressly waive any claims for damages as a result thereof. Public release of the test results does not impose liability for defamation or constitute a ground for recovery in a civil action.

Donor's Signature Date

Drug Testing Custody and Control Form
Testing Authority: Normation Normation: Normat
To be completed and verified by collector/validator: Collector's Name: Collector/validator: Validator's Name: Collector/validator: Validator's Name: Collector/validator: Sport: Collector's Gender: Optional on site Specimen Assessment: Specific Gravity:
Validator Affidavit: I certify that I witnessed the donor during the collection process. The collection container and specimen/remained in control of the donor throughout this process and remained in constant view of the donor and me. X While the donor throughout this process and remained in constant view of the donor and me. Validator's Signature While the donor throughout this process and remained in constant view of the donor and me.
<u>Collector Affidavit:</u> I certify that the donor provided the specimen on this date in accordance with specified collection procedures. I further certify the specimen was given to me by the donor and was packaged and sealed and will be given to entity identified below. $X = A = \underbrace{A = A = A = \underbrace{A = A = \underbrace{A = A = A = \underbrace{A = A = A = A = A = A = A = A = A = A =$
SMRTL (by hand delivery) Courier: Waybill/Airbill# Other:
To be completed by Laboratory: Received By:
Specimen Vial Seals Intact: YES NO
To be completed by collector and verified by donor: (not to be included on lab copy)
Donor's Name Donor's ID #
Donor Affidavit: I certify that I provided this specimen. The specimen was in my control until the collector packaged the specimen in the vials and applied the security seal(s). The information provided on this form and on the labels affixed to the specimen bottles are correct. I hereby authorize the testing laboratory to release the results of the test to the designated designee.

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a Х Date

Donor's Signature

Drug Testing Custody and Control Form
Testing Authority: <u>Nevada Athlatic</u> (MMISSION Durine Ablood Passport Delood hGH Out of Competition Alin Competition Additional Information: <u>UFC 189</u> Testing Authority: Commission Deloge Commentation: <u>Nevada Athlatic</u> (Commission Deloge Commentation: <u>Specimen 10</u> : Solo 7232200 Specimen 10: Specimen 10: Spe
To be completed and verified by collector/validator: Collector's Name: Collector/validator: Validator's Name: Collector/validator: Validator's Name: Collection Date: Sport: Donor's Gender: Optional On site Specimen Assessment: Specific Gravity:
Validator Affidavit: I certify that I witnessed the donor during the collection process. The collection container and specimen remained in control of the donor throughout this process and remained in constant view of the donor and me. X
<u>Collector Affidavit:</u> I certify that the donor provided the specimen on this date in accordance with specified collection procedures. I further certify the specimen was given to me by the donor and was packaged and sealed and will be given to entity identified below. X
Specimen to be released to: SMRTL (by hand delivery) Courier: Waybill/Airbill# Other:
To be completed by Laboratory: Received By:
Accessioner's Signature date/time Accessioner PRINT Name Specimen Vial Seals Intact: YES NO
To be completed by collector and verified by donor: (not to be included on lab copy)

By signing below, I hereby accept the risk of adverse public notice of the test results, embarrassment, criticism, financial loss or other action, and expressly waive any claims for damages as a result thereof. Public release of the test results does not impose liability, for defamation or constitute a ground for recovery in a civil action.

Donor's Signature Date

Drug Testing Custody and Control Form
Testing Authority: Nevado Arklatic Commission Urine Blood Passport & Blood hGH Specimen ID: 5007232192 Out of Competition Aln Competition Additional Information: UFC 189
To be completed and verified by collector/validator: Collector's Name: Collector/validator: Validator's Name: Collector/validator: Validator's Name: Collector/validator: Sport: Collection Date: Optional On site Specimen Assessment: Specific Gravity:
Validator Affidavit: I certify that I witnessed the donor during the collection process. The collection container and specimen remained in control of the donor throughout this process and remained in constant view of the donor and me. X Off III (15) Validator's Signature Date
<u>Collector Affidavit:</u> I certify that the donor provided the specimen on this date in accordance with specified collection procedures. I further certify the specimen was given to me by the donor and was packaged and sealed and will be given to entity identified below. $X = \underbrace{AH}_{Collector's Signature}_{Collector's Signature}_{Date} = \underbrace{DAH}_{Date} = \underbrace{DOH}_{Time}_{Time} = \underbrace{DOH}_{Time}_{Date} = \underbrace{DOH}_{Time}_{Time}_{Date} = \underbrace{DOH}_{Time}_{Date} = DOH$
SMRTL (by hand delivery) Courier: Waybill/Airbill# Other:
To be completed by Laboratory: Received By:
Accessioner's Signature date/time Accessioner PRINT Name Specimen Vial Seals Intact: YES NO
To be completed by collector and verified by donor: (not to be included on lab copy) And Andres Donor's Name Donor's ID #

By signing below, I hereby accept the risk of adverse public notice of the test results, embarrassment, criticism, financial loss or other action, and expressly waive any claims for damages as a result thereof. Public release of the test results does not impose hability for defamation or constitute a ground for recovery in a civil action.

Donor's Signature Date



CONFIDENTIAL TEST REPORT

Christopher A. Eccles Attorney General of Nevada 555 E. Washington Ave., Suite 3900 Las Vegas, NV 89101

Program:	WADA Partial Menu	Collection Date:	7/5/2015
Lab ID:	302781	Lab Receipt Date:	7/6/2015
Specimen ID:	S007232580	Report Date:	7/22/2015
Test type:	Out of competition	Gender:	Male
Mission Ref#:	UFC 189	Sample Matrix:	Urine
Sport:	Mixed Martial Arts	pH:	8.5
Discipline:	Mixed Martial Arts	Specific Gravity:	1.012
Container:	A Bottle 302781-1		

Analysis Requested: Specimen was analyzed for Anabolic Agents (S1); Peptide Hormones, Growth Factors and Related Substances (S2); Beta-2 Agonists (S3); Hormone and Metabolic Modulators (S4) and Diuretics and Other Masking Agents (S5) using GC/MS, LC/MS and Immunoassay test methods. Result: No Prohibited Substance(s) or Prohibited Method(s), or their Metabolite(s) or Marker(s) on the test menu were detected.

Unless otherwise noted the condition of the specimen was acceptable when received at the laboratory.

Endogenous	Steroid Data (screen):					
Andro	Etio	DHEA	Ері	Test	T/E	5α-diol	5β-diol
1300 ng/mL	2300 ng/mL	25 ng/mL	25 ng/mL	8.1 ng/mL	.33	36 ng/mL	130 ng/mL

Thane Campbell

Alan (angelill

Wednesday, July 22, 2015

Date

Certified By

Signature

Accredited by the World Anti-Doping Agency as compliant with the requirements of the World Anti-Doping Code.

Accredited by the American Association for Laboratory Accreditation as compliant with the requirements of ISO/IEC 17025, Testing Certificate 2500.01.

The results contained herein relate only to the items tested. This report shall not be reproduced, except in full, without the expressed written consent of the Laboratory.



CONFIDENTIAL TEST REPORT

Christopher A. Eccles Attorney General of Nevada 555 E. Washington Ave., Suite 3900 Las Vegas, NV 89101

Program:	Complete Blood Count	Colle
Lab ID:	301604	Lab Re
Specimen ID:	S007232614	Re
Test type:	Out of competition	
Mission Ref#:	UFC 189	Sam
Sport:	Mixed Martial Arts	
Discipline:	Mixed Martial Arts	
Container:	Whole Blood Tube - A 301604-1	

Collection Date: 7/5/2015 Lab Receipt Date: 7/6/2015 Report Date: 7/6/2015 Gender: Male Sample Matrix: Blood

Analysis Requested: Specimen was analyzed for hematological parameters.

Unless otherwise noted the condition of the specimen was acceptable when received at the laboratory.

Parameter	Analysis
Instrument: XT-2000i #1	Date: 6-Jul-2015 12:11
Red blood cells	4.55 10^6/uL
Hemoglobin	13.7 g/dL
Hematocrit	40.1 %
Mean corpuscular volume	88.1 fL
Mean corpuscular hemoglobin	30.1 pg
Mean corpuscular hb concentr.	34.2 g/dL
Reticulocyte percentage	0.98 %
Reticulocyte number	0.0446 10^6/uL
RDW Standard Deviation	40.1 fL
Immature Reticulocyte Fraction	9.0 %
Off-Score	77.6

Judy Field

July 2. Juil

Monday, July 06, 2015

Date

Certified By

Signature

Accredited by the World Anti-Doping Agency as compliant with the requirements of the World Anti-Doping Code.

Accredited by the American Association for Laboratory Accreditation as compliant with the requirements of ISO/IEC 17025, Testing Certificate 2500.01.



CONFIDENTIAL TEST REPORT

Christopher A. Eccles Attorney General of Nevada 555 E. Washington Ave., Suite 3900 Las Vegas, NV 89101

Program: Lab ID:	Human Growth Hormone	Collection Date: Lab Receipt Date:	
Specimen ID:		Report Date:	
-	Out of competition	Gender:	Male
Mission Ref#:	UFC 189	Sample Matrix:	Blood
Sport:	Mixed Martial Arts		
Discipline:	Mixed Martial Arts		
Container:	Serum Separator Tube - A 301605-1		
Result:	Specimen was analyzed for Peptide Hor including Growth Hormone (hGH) using No Prohibited Substance(s) or Prohibite test menu were detected. <i>vise noted the condition of the specimen</i>	Immunoassay test methods. d Method(s), or their Metabo	olite(s) or Marker(s) on the
GH Data:			

hGH ratio .141 X:1 hGH Kit 1

Judy Field

Jung 2. Juil

Wednesday, July 08, 2015

Date

Certified By

hGl

Signature

Accredited by the World Anti-Doping Agency as compliant with the requirements of the World Anti-Doping Code.

Accredited by the American Association for Laboratory Accreditation as compliant with the requirements of ISO/IEC 17025, Testing Certificate 2500.01.

Drug Testing Custody and Control Form
Testing Authority: Nevada Atthetic Commission & Urine Blood Passport Blood hGH Out of Competition Additional Information: UFC 189
To be completed and verified by collector/validator: Collector's Name: Image: Collector/validator: Validator's Name: Image: Collector/validator: Validator's Name: Image: Collector/validator: Sport: Collection Date: Optional On site Specimen Assessment: Specific Gravity:
Validator Affidavit: I certify that I witnessed the donor during the collection process. The collection container and specimen remained in constant view of the donor and me.
Collector Affidavit: I certify that the donor provided the specimen on this date in accordance with specified collection procedures. I further certify the specimen was given to me by the donor and was packaged and sealed and will be given to entity identified below.
Fo be completed by Laboratory: Received By:
specimen Vial Seals Intact: YES NO
To be completed by collector and verified by donor: (not to be included on lab copy)
CONOF McGPgor Donor's Name Donor's ID #
<u>Conor Affidavit:</u> I certify that I provided this specimen. The specimen was in my control until the collector packaged the pecimen in the vials and applied the security seal(s). The information provided on this form and on the labels affixed to

specimen in the vials and applied the security seal(s). The information provided on this form and on the labels affixed to the specimen bottles are correct. I hereby authorize the testing laboratory to release the results of the test to the designated designee. By signing below, I hereby accept the risk of adverse public notice of the test results, embarrassment, criticism, financial

loss or other action, and expressly waive any claims for damages as a result thereof. Public release of the test results does not impose liability for defenation of constitute a ground for recovery in a civil action.

Donor's Signature Date

Drug Testing Custody and Control Form
Testing Authority: Neulada At Reference Commission Specimen ID: AUrine Blood Passport Blood hGH Specimen ID: Sold 80665 Out of Competition AIn Competition Pre Fight Sold 80665 Additional Information: UFC 189
To be completed and verified by collector/validator: Collector's Name: WHS Validator's Name: WHS Sport: Donor's Gender: Optional On site Specimen Assessment: Specific Gravity:
Validator Affidavit: I certify that I witnessed the donor during the collection process. The collection container and specimen remained in control of the donor throughout this process and remained in constant view of the donor and me. X
To be completed by Laboratory: Received By: Accessioner's Signature date/time Accessioner PRINT Name Specimen Vial Seals Intact: YES NO
To be completed by collector and verified by donor: (not to be included on lab copy) Lonor McGregor Donor's Name Donor's ID #

By signing below, I hereby accept the gisk of adverse public notice of the test results, embarrassment, criticism, financial loss or other action, and expressly wive any claims for damages as a result thereof. Public release of the test results does not impose lightlity for defamation or constitute a ground for recovery in a civil action.

Donor's Signatur

7/11/1C Date

Drug Testing Custody and Control Form
Drug Testing Custody and Control Form Testing Authority: New Arthetic OMMISS/OD Drug Testing Custody and Control Form Testing Authority: New Arthetic OMMISS/OD Drug Testing Custody and Control Form Specimen ID: Specimen ID: Solo8080731 Dut of Competition Additional Information: UFC 189
To be completed and verified by collector/validator: Collector's Name: Collector/validator: Validator's Name: Collection Date: OHN Validator's Name: Collection Date: OHN Sport: Collection Date: OHN Sport: Collection Date: OHN Optional On site Specimen Assessment: Specific Gravity: DH:
Validator Affidavit: I certify that I witnessed the donor during the collection process. The collection container and specimer remained in control of the donor throughout this process and remained in constant view of the donor and me. X Of II Of II Validator's Signature Date
Collector Affidavit: I certify that the donor provided the specimen on this date in accordance with specified collection procedures. I further certify the specimen was given to me by the donor and was packaged and sealed and will be given to entity identified below. X <td< td=""></td<>
To be completed by Laboratory: Received By: Accessioner's Signature Accessioner's Signature date/time Accessioner PRINT Name Specimen Vial Seals Intact: YES NO
To be completed by collector and verified by donor: (not to be included on lab copy) Conc Action of the copy of the co
Donor Affidavit: I certify that I provided this specimen. The specimen was in my control until the collector packaged the specimen in the vials and applied the security seal(s). The information provided on this form and on the labels affixed to the specimen bottles are correct. I hereby authorize the testing laboratory to release the results of the test to the designated designee.

By signing below, I hereby accept the risk of adverse public notice of the test results, embarrassment, criticism, financial loss or other action, and expressly waive any claims for damages as a result thereof. Public release of the test results does not impose liability for defamation or constitute a ground for recovery in a civil action.

Donor's Signature Date

Drug Testing Custody and Control Form
Testing Authority: Nevada A+Retic COMMISSION Urine Blood Passport & Blood hGH Specimen ID: Specimen ID: S007232739 Out of Competition & In Competition Pre Fight Post Fight S007232739 Additional Information: HC 189
To be completed and verified by collector/validator: Collector's Name:
Validator Affidavit: I certify that I witnessed the donor during the collection process. The collection container and specimen remained in constant view of the donor and me. X
Collector Affidavit: I certify that the donor provided the specimen on this date in accordance with specified collection procedures. I further certify the specimen was given to me by the donor and was packaged and sealed and will be given to entity identified below. x Value x Value collector's Signature Value VSMRTL (by hand delivery) Courier: Waybill/Airbill# Waybill/Airbill#
To be completed by Laboratory: Received By: Accessioner's Signature date/time Accessioner PRINT Name
Specimen Vial Seals Intact: YES NO To be completed by collector and verified by donor: (not to be included on lab copy)
Donor Affidavit: I certify that I provided this specimen. The specimen was in my control until the collector packaged the specimen in the vials and applied the security seal(s). The information provided on this form and on the labels affixed to the specimen bottles are correct. I hereby authorize the testing laboratory to release the results of the test to the designated designee. By signing below, I hereby accept the risk of adverse public notice of the test results, embarrassment, criticism, financial loss or other action, and expressly waive any claims for damages as a result thereof. Public release of the test results does not impose liability for defaniation or constitute a ground for recovery in a civil action.

Donor's	Signature

Date



CONFIDENTIAL TEST REPORT

Christopher A. Eccles Attorney General of Nevada 555 E. Washington Ave., Suite 3900 Las Vegas, NV 89101

Program:	WADA Full Menu	Collection Date:	7/11/2015
Lab ID:	303526	Lab Receipt Date:	7/13/2015
Specimen ID:	S008080673	Report Date:	8/5/2015
Test type:	In competition	Gender:	Male
Mission Ref#:	UFC-189	Sample Matrix:	Urine
Sport:	Mixed Martial Arts	pH:	10.1
Discipline:	Mixed Martial Arts	Specific Gravity:	1.016
Container:	A Bottle 303526-1		

Analysis Requested: Specimen was analyzed for Anabolic Agents (S1); Peptide Hormones, Growth Factors and Related Substances (S2); Beta-2 Agonists (S3); Hormone and Metabolic Modulators (S4); Diuretics and Other Masking Agents (S5); Stimulants (S6); Narcotics (S7); Cannabinoids (S8) and Glucocorticosteroids (S9) using GC/MS, LC/MS and Immunoassay test methods.

Result: No Prohibited Substance(s) or Prohibited Method(s), or their Metabolite(s) or Marker(s) on the test menu were detected.

Unless otherwise noted the condition of the specimen was acceptable when received at the laboratory.

Endogenous	Steroid Data ((screen):					
Andro	Etio	DHEA	Ері	Test	T/E	5α-diol	5β-diol
400 ng/mL	690 ng/mL	15 ng/mL	6.8 ng/mL	5.1 ng/mL	.76	23 ng/mL	76 ng/mL

Vinod Nair

Vinod Kair

Wednesday, August 05, 2015

Date

Certified By

Signature

Accredited by the World Anti-Doping Agency as compliant with the requirements of the World Anti-Doping Code.

Accredited by the American Association for Laboratory Accreditation as compliant with the requirements of ISO/IEC 17025, Testing Certificate 2500.01.

The results contained herein relate only to the items tested. This report shall not be reproduced, except in full, without the expressed written consent of the Laboratory.



CONFIDENTIAL TEST REPORT

Christopher A. Eccles Attorney General of Nevada 555 E. Washington Ave., Suite 3900 Las Vegas, NV 89101

Program:	WADA Full Menu	Collection Date:	7/11/2015
Lab ID:	303541	Lab Receipt Date:	7/13/2015
Specimen ID:	S008080665	Report Date:	7/30/2015
Test type:	In competition	Gender:	Male
Mission Ref#:	UFC189	Sample Matrix:	Urine
Sport:	Mixed Martial Arts	pH:	4.9
Discipline:	Mixed Martial Arts	Specific Gravity:	1.025
Container:	A Bottle 303541-1		

Analysis Requested: Specimen was analyzed for Anabolic Agents (S1); Peptide Hormones, Growth Factors and Related Substances (S2); Beta-2 Agonists (S3); Hormone and Metabolic Modulators (S4); Diuretics and Other Masking Agents (S5); Stimulants (S6); Narcotics (S7); Cannabinoids (S8) and Glucocorticosteroids (S9) using GC/MS, LC/MS and Immunoassay test methods. Description Image: Second Se

Result: No Prohibited Substance(s) or Prohibited Method(s), or their Metabolite(s) or Marker(s) on the test menu were detected.

Unless otherwise noted the condition of the specimen was acceptable when received at the laboratory.

Endogenous	Steroid Data ((screen):					
Andro	Etio	DHEA	Epi	Test	T/E	5α-diol	5β-diol
980 ng/mL	1600 ng/mL	48 ng/mL	14 ng/mL	13 ng/mL	.88	52 ng/mL	150 ng/mL

Michael J. Madsen

1/ Ma

Thursday, July 30, 2015

Date

Certified By

Signature

Accredited by the World Anti-Doping Agency as compliant with the requirements of the World Anti-Doping Code.

Accredited by the American Association for Laboratory Accreditation as compliant with the requirements of ISO/IEC 17025, Testing Certificate 2500.01.

The results contained herein relate only to the items tested. This report shall not be reproduced, except in full, without the expressed written consent of the Laboratory.



CONFIDENTIAL TEST REPORT

Christopher A. Eccles Attorney General of Nevada 555 E. Washington Ave., Suite 3900 Las Vegas, NV 89101

Program:	Complete Blood Count	Co
Lab ID:	302747	Lab
Specimen ID:	\$008080731	
Test type:	In competition	
Mission Ref#:	UFC 189 Post Fight	S
Sport:	Mixed Martial Arts	
Discipline:	Mixed Martial Arts	
Container:	Whole Blood Tube - A 302747-1	

Collection Date: 7/11/2015 Lab Receipt Date: 7/13/2015 Report Date: 7/16/2015 Gender: Male Sample Matrix: Blood

Analysis Requested: Specimen was analyzed for hematological parameters.

Unless otherwise noted the condition of the specimen was acceptable when received at the laboratory.

Parameter	Analysis
Instrument: XT-2000i #1	Date: 13-Jul-2015 14:43
Red blood cells	4.15 10^6/uL
Hemoglobin	13.5 g/dL
Hematocrit	39.6 %
Mean corpuscular volume	95.4 fL
Mean corpuscular hemoglobin	32.5 pg
Mean corpuscular hb concentr.	34.1 g/dL
Reticulocyte percentage	0.57 %
Reticulocyte number	0.0237 10^6/uL
RDW Standard Deviation	43.5 fL
Immature Reticulocyte Fraction	3.6 %
Off-Score	89.7

Judy Field

July 2. Juil

Thursday, July 16, 2015

Date

Certified By

Signature

Accredited by the World Anti-Doping Agency as compliant with the requirements of the World Anti-Doping Code.

Accredited by the American Association for Laboratory Accreditation as compliant with the requirements of ISO/IEC 17025, Testing Certificate 2500.01.

The results contained herein relate only to the items tested. This report shall not be reproduced, except in full, without the expressed written consent of the Laboratory.



CONFIDENTIAL TEST REPORT

Christopher A. Eccles Attorney General of Nevada 555 E. Washington Ave., Suite 3900 Las Vegas, NV 89101

Program:	Human Growth Hormone	Collection Date:	7/11/2015
Lab ID:	302755	Lab Receipt Date:	7/13/2015
Specimen ID:	S007232739	Report Date:	7/21/2015
Test type:	In competition	Gender:	Male
Mission Ref#:	UFC 189 Post Fight	Sample Matrix:	Blood
Sport:	Mixed Martial Arts	-	
Discipline:	Mixed Martial Arts		
Container:	Serum Separator Tube - A 302755-1		
Result:	Specimen was analyzed for Peptide Ho including Growth Hormone (hGH) using No Prohibited Substance(s) or Prohibited test menu were detected. vise noted the condition of the specimen	g Immunoassay test methods. ed Method(s), or their Metabo	olite(s) or Marker(s) on the
H Data:			

hGH ratio .656 X:1 hGH Kit 1

Judy Field

Jung 2. Juil

Tuesday, July 21, 2015

Date

Certified By

hGl

Signature

Accredited by the American Association for Laboratory Accreditation as compliant with the requirements of ISO/IEC 17025, Testing Certificate 2500.01.

The results contained herein relate only to the items tested. This report shall not be reproduced, except in full, without the expressed written consent of the Laboratory.

Drug Testing Custody and Control Form
Testing Authority: Neuroda AttaletaCondition X Urine \square Blood Passport \square Blood hGHSpecimen ID: \square Out of Competition X In Competition \square Pre Fight \square So 0 6 2 0 5 5 5 3Additional Information: \square UFC 189 \square Post Fight \square So 0 6 2 0 5 5 5 3
To be completed and verified by collector/validator: Collector's Name: Image: Collector / validator: Validator's Name: Image: Collector / validator: Sport: Collection Date: Optional On site Specimen Assessment: Specific Gravity:
Validator Affidavit: I certify that I witnessed the donor during the collection process. The collection container and specimen remained in control of the donor throughout this process and remained in constant view of the donor and me. X
<u>Collector Affidavit:</u> I certify that the donor provided the specimen on this date in accordance with specified collection procedures. I further certify the specimen was given to me by the donor and was packaged and sealed and will be given to entity identified below. X
Courier: Waybill/Airbill# Other: To be completed by Laboratory:
Received By:
To be completed by collector and verified by donor: (not to be included on lab copy)
Donor's Name Donor's ID # Donor Affidavit: I certify that I provided this specimen. The specimen was in my control until the collector packaged the specimen in the vials and applied the security seal(s). The information provided on this form and on the labels affixed to

specimen in the vials and applied the security seal(s). The information provided on this form and on the labels affixed to the specimen bottles are correct. I hereby authorize the testing laboratory to release the results of the test to the designated designee.

By signing below, I hereby accept the risk of adverse public notice of the test results, embarrassment, criticism, financial loss or other action, and expressly waive any claims for damages as a result thereof. Public release of the test results does not impose liability for defamation or constitute a ground for recovery in a civil action.

Donor's Signature Date

Drug Testing Custody and Control Form
Testing Authority: Normation Normation: Normat
To be completed and verified by collector/validator: Collector's Name: Collector/validator: Validator's Name: Collector/validator: Validator's Name: Collector/validator: Sport: Collector's Gender: Optional on site Specimen Assessment: Specific Gravity:
Validator Affidavit: I certify that I witnessed the donor during the collection process. The collection container and specimen/remained in control of the donor throughout this process and remained in constant view of the donor and me. X While the donor throughout this process and remained in constant view of the donor and me. Validator's Signature While the donor throughout this process and remained in constant view of the donor and me.
<u>Collector Affidavit:</u> I certify that the donor provided the specimen on this date in accordance with specified collection procedures. I further certify the specimen was given to me by the donor and was packaged and sealed and will be given to entity identified below. $X = A = \underbrace{A = A = A = \underbrace{A = A = \underbrace{A = A = A = \underbrace{A = A = A = A = A = A = A = A = A = A =$
SMRTL (by hand delivery) Courier: Waybill/Airbill# Other:
To be completed by Laboratory: Received By:
Specimen Vial Seals Intact: YES NO
To be completed by collector and verified by donor: (not to be included on lab copy)
Donor's Name Donor's ID #
Donor Affidavit: I certify that I provided this specimen. The specimen was in my control until the collector packaged the specimen in the vials and applied the security seal(s). The information provided on this form and on the labels affixed to the specimen bottles are correct. I hereby authorize the testing laboratory to release the results of the test to the designated designee.

By signing below, I hereby accept the risk of adverse public notice of the test results, embarrassment, criticism, financial loss or other action, and expressly waive any claims for damages as a result thereof. Public release of the test results does not impose liability for defamation or constitute a ground for recovery in a civil action.

a Х Date

Donor's Signature

Drug Testing Custody and Control Form
Testing Authority: <u>Nevada Athlatic</u> (MMISSION Durine Ablood Passport Delood hGH Out of Competition Alin Competition Additional Information: <u>UFC 189</u> Testing Authority: Commission Deloge Commentation: <u>Nevada Athlatic</u> (Commission Deloge Commentation: <u>Specimen 10</u> : Solo 7232200 Specimen 10: Specimen 10: Spe
To be completed and verified by collector/validator: Collector's Name: Collector/validator: Validator's Name: Collector/validator: Validator's Name: Collection Date: Sport: Donor's Gender: Optional On site Specimen Assessment: Specific Gravity:
Validator Affidavit: I certify that I witnessed the donor during the collection process. The collection container and specimen remained in control of the donor throughout this process and remained in constant view of the donor and me. X
<u>Collector Affidavit:</u> I certify that the donor provided the specimen on this date in accordance with specified collection procedures. I further certify the specimen was given to me by the donor and was packaged and sealed and will be given to entity identified below. X
Specimen to be released to: SMRTL (by hand delivery) Courier: Waybill/Airbill# Other:
To be completed by Laboratory: Received By:
Accessioner's Signature date/time Accessioner PRINT Name Specimen Vial Seals Intact: YES NO
To be completed by collector and verified by donor: (not to be included on lab copy)

By signing below, I hereby accept the risk of adverse public notice of the test results, embarrassment, criticism, financial loss or other action, and expressly waive any claims for damages as a result thereof. Public release of the test results does not impose liability, for defamation or constitute a ground for recovery in a civil action.

Donor's Signature Date

Drug Testing Custody and Control Form
Testing Authority: Nevado Arklatic Commission Urine Blood Passport & Blood hGH Specimen ID: 5007232192 Out of Competition Aln Competition Additional Information: UFC 189
To be completed and verified by collector/validator: Collector's Name: Collector/validator: Validator's Name: Collector/validator: Validator's Name: Collector/validator: Sport: Collection Date: Optional On site Specimen Assessment: Specific Gravity:
Validator Affidavit: I certify that I witnessed the donor during the collection process. The collection container and specimen remained in control of the donor throughout this process and remained in constant view of the donor and me. X Off III (15) Validator's Signature Date
<u>Collector Affidavit:</u> I certify that the donor provided the specimen on this date in accordance with specified collection procedures. I further certify the specimen was given to me by the donor and was packaged and sealed and will be given to entity identified below. $X = \underbrace{AH}_{Collector's Signature}_{Collector's Signature}_{Date} = \underbrace{DAH}_{Date} = \underbrace{DOH}_{Time}_{Date} = \underbrace{DOH}_{Time$
SMRTL (by hand delivery) Courier: Waybill/Airbill# Other:
To be completed by Laboratory: Received By:
Accessioner's Signature date/time Accessioner PRINT Name Specimen Vial Seals Intact: YES NO
To be completed by collector and verified by donor: (not to be included on lab copy) And Andres Donor's Name Donor's ID #

By signing below, I hereby accept the risk of adverse public notice of the test results, embarrassment, criticism, financial loss or other action, and expressly waive any claims for damages as a result thereof. Public release of the test results does not impose hability for defamation or constitute a ground for recovery in a civil action.

Donor's Signature Date



CONFIDENTIAL TEST REPORT

Christopher A. Eccles Attorney General of Nevada 555 E. Washington Ave., Suite 3900 Las Vegas, NV 89101

Program:	WADA Full Menu	Collection Date:	7/11/2015
Lab ID:	303547	Lab Receipt Date:	7/13/2015
Specimen ID:	S006205553	Report Date:	7/30/2015
Test type:	In competition	Gender:	Male
Mission Ref#:	UFC189	Sample Matrix:	Urine
Sport:	Mixed Martial Arts	pH:	5.6
Discipline:	Mixed Martial Arts	Specific Gravity:	1.004
Container:	A Bottle 303547-1		

Analysis Requested: Specimen was analyzed for Anabolic Agents (S1); Peptide Hormones, Growth Factors and Related Substances (S2); Beta-2 Agonists (S3); Hormone and Metabolic Modulators (S4); Diuretics and Other Masking Agents (S5); Stimulants (S6); Narcotics (S7); Cannabinoids (S8) and Glucocorticosteroids (S9) using GC/MS, LC/MS and Immunoassay test methods.

Result: No Prohibited Substance(s) or Prohibited Method(s), or their Metabolite(s) or Marker(s) on the test menu were detected.

Unless otherwise noted the condition of the specimen was acceptable when received at the laboratory.

Endogenous	Steroid Data (screen):					
Andro	Etio	DHEA	Ері	Test	T/E	5α-diol	5β-diol
300 ng/mL	310 ng/mL	3 ng/mL	2.6 ng/mL	<loq< td=""><td>N/A</td><td><loq< td=""><td><loq< td=""></loq<></td></loq<></td></loq<>	N/A	<loq< td=""><td><loq< td=""></loq<></td></loq<>	<loq< td=""></loq<>

Michael J. Madsen

1/ the

Thursday, July 30, 2015

Date

Certified By

Signature

Accredited by the American Association for Laboratory Accreditation as compliant with the requirements of ISO/IEC 17025, Testing Certificate 2500.01.



CONFIDENTIAL TEST REPORT

Christopher A. Eccles Attorney General of Nevada 555 E. Washington Ave., Suite 3900 Las Vegas, NV 89101

Program:	WADA Full Menu	Collection Date:	7/11/2015
Lab ID:	303524	Lab Receipt Date:	7/13/2015
Specimen ID:	S008080657	Report Date:	7/30/2015
Test type:	In competition	Gender:	Male
Mission Ref#:	UFC	Sample Matrix:	Urine
Sport:	Mixed Martial Arts	pH:	4.8
Discipline:	Mixed Martial Arts	Specific Gravity:	1.015
Container:	A Bottle 303524-1		

Analysis Requested: Specimen was analyzed for Anabolic Agents (S1); Peptide Hormones, Growth Factors and Related Substances (S2); Beta-2 Agonists (S3); Hormone and Metabolic Modulators (S4); Diuretics and Other Masking Agents (S5); Stimulants (S6); Narcotics (S7); Cannabinoids (S8) and Glucocorticosteroids (S9) using GC/MS, LC/MS and Immunoassay test methods.

Result: No Prohibited Substance(s) or Prohibited Method(s), or their Metabolite(s) or Marker(s) on the test menu were detected.

Unless otherwise noted the condition of the specimen was acceptable when received at the laboratory.

Endogenous	Steroid Data ((screen):					
Andro	Etio	DHEA	Ері	Test	T/E	5α-diol	5β-diol
520 ng/mL	590 ng/mL	20 ng/mL	7.4 ng/mL	5.2 ng/mL	.7	15 ng/mL	26 ng/mL

Michael J. Madsen

1 du

Thursday, July 30, 2015

Date

Certified By

Signature

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CONFIDENTIAL TEST REPORT

Christopher A. Eccles Attorney General of Nevada 555 E. Washington Ave., Suite 3900 Las Vegas, NV 89101

Program:	Complete Blood Count	
Lab ID:	302746	La
Specimen ID:	S007232200	
Test type:	In competition	
Mission Ref#:	UFC 189 Post Fight	
Sport:	Mixed Martial Arts	
Discipline:	Mixed Martial Arts	
Container:	Whole Blood Tube - A 302746-1	

Collection Date: 7/11/2015 Lab Receipt Date: 7/13/2015 Report Date: 7/16/2015 Gender: Male Sample Matrix: Blood

Analysis Requested: Specimen was analyzed for hematological parameters.

Unless otherwise noted the condition of the specimen was acceptable when received at the laboratory.

Parameter	Analysis
Instrument: XT-2000i #1	Date: 13-Jul-2015 14:41
Red blood cells	4.13 10^6/uL
Hemoglobin	12.4 g/dL
Hematocrit	36.9 %
Mean corpuscular volume	89.3 fL
Mean corpuscular hemoglobin	30.0 pg
Mean corpuscular hb concentr.	33.6 g/dL
Reticulocyte percentage	0.95 %
Reticulocyte number	0.0392 10^6/uL
RDW Standard Deviation	39.8 fL
Immature Reticulocyte Fraction	12.6 %
Off-Score	65.5

Judy Field

July 2. Juil

Thursday, July 16, 2015

Date

Certified By

Signature

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CONFIDENTIAL TEST REPORT

Christopher A. Eccles Attorney General of Nevada 555 E. Washington Ave., Suite 3900 Las Vegas, NV 89101

Lab ID:302749Lab Receipt Date:7/13/2015Specimen ID:S007232192Report Date:7/21/2015Test type:In competitionGender:MaleMission Ref#:UFC 189 Post FightSample Matrix:Blood	
Test type:In competitionGender:MaleMission Ref#:UFC 189 Post FightSample Matrix:Blood	
Mission Ref#: UFC 189 Post Fight Sample Matrix: Blood	
5 1	
Sport: Mixed Martial Arts	
Sport: Mixed Martial Arts	
Discipline: Mixed Martial Arts	
Container: Serum Separator Tube - A 302749-1	
 Analysis Requested: Specimen was analyzed for Peptide Hormones, Growth Factors and Related Substances (S2) including Growth Hormone (hGH) using Immunoassay test methods. Result: No Prohibited Substance(s) or Prohibited Method(s), or their Metabolite(s) or Marker(s) on the test menu were detected. Unless otherwise noted the condition of the specimen was acceptable when received at the laboratory. 	e
H Data:	

hGH ratio .651 X:1 hGH Kit 1

Judy Field

Jung 2. Juil

Tuesday, July 21, 2015

Date

Certified By

hGł

Signature

Accredited by the American Association for Laboratory Accreditation as compliant with the requirements of ISO/IEC 17025, Testing Certificate 2500.01.

Drug Testing Custody and Control Form
Testing Authority: <u>Nevada Athletic</u> Commission & Urine Blood Passport Blood hGH Dut of Competition Aln Competition Additional Information: <u>UFC 189</u> Testing Authority: <u>Nevada Athletic</u> Commission Specimen ID: S008080772 Blood hGH Specimen ID: S008080772 SPECIMEN ID NO.
To be completed and verified by collector/validator: Collector's Name:
<u>Validator Affidavit:</u> I certify that I witnessed the donor during the collection process. The collection container and specimen remained in control of the donor throughout this process and remained in constant view of the donor and me. X
Collector Affidavit: I certify that the donor provided the specimen on this date in accordance with specified collection procedures. I further certify the specimen was given to me by the donor and was packaged and sealed and will be given to entity identified below. X
To be completed by Laboratory: Received By:
Specimen Vial Seals Intact: YES NO To be completed by collector and verified by donor: (not to be included on lab copy)
breny stephens Donor's Name Donor's ID #

By signing below, I hereby accept the risk of adverse public notice of the test results, embarrassment, criticism, financial loss or other action, and expressly waive any claims for damages as a result thereof. Public release of the test results does not impose liability for defamation or constitute a ground for recovery in a civil action.

7-11-13

Date

Х Qonor's Signature

Drug Testing Custody and Control Form
Testing Authority: <u>Neurala Atrice Commission</u> AUrine Blood Passport Blood hGH Out of Competition Aln Competition Additional Information: <u>UFC 189</u> Testing Authority: <u>Source</u> Signt Pre Fight Pre Fight Source Fight Source Fight Specimen ID: <u>Source</u> Source Signt Specimen ID: <u>Source</u> Source Signt Specimen ID: <u>Source</u> Source Signt Specimen ID: <u>Source</u> Source Signt Specimen ID: <u>Source</u> Source Signt Source Signt Sourc
To be completed and verified by collector/validator: Collector's Name:
Validator Affidavit: I certify that I witnessed the donor during the collection process. The collection container and specimen remained in control of the donor throughout this process and remained in constant view of the donor and me. X
Collector Affidavit: I certify that the donor provided the specimen on this date in accordance with specified collection procedures. I further certify the specimen was given to me by the donor and was packaged and sealed and will be given to entity identified below. X V Collector's Signature V Specimen to be released to: V V V V V Ourier: V Other: V
To be completed by Laboratory: Received By:
To be completed by collector and verified by donor: (not to be included on lab copy)

<u>Donor Affidavit</u>: I certify that I provided this specimen. The specimen was in my control until the collector packaged the specimen in the vials and applied the security seal(s). The information provided on this form and on the labels affixed to the specimen bottles are correct. I hereby authorize the testing laboratory to release the results of the test to the designated designee.

Date Donor's Signature

Drug Testing Custody and Control Form
Testing Authority: Neural Athletic Commission In Urine XBlood Passport Blood hGH Specimen ID: In Out of Competition XIn Competition Pre Fight Additional Information: Image: Commission XIn Competition
To be completed and verified by collector/validator: Collector's Name: Collector/validator: Validator's Name: Collector/validator: Validator's Name: Collection Date: Optional On site Specimen Assessment: Specific Gravity:
Validator Affidavit: I certify that I witnessed the donor during the collection process. The collection container and specimen remained in control of the donor throughout this process and remained in constant view of the donor and me. X Validator's Signature
Collector Affidavit: I certify that the donor provided the specimen on this date in accordance with specified collection procedures. I further certify the specimen was given to me by the donor and was packaged and sealed and will be given to entity identified below. x
To be completed by Laboratory: Received By: Accessioner's Signature date/time Accessioner PRINT Name Specimen Vial Seals Intact: YES NO
To be completed by collector and verified by donor: (not to be included on lab copy)

<u>Donor Affidavit</u>: I certify that I provided this specimen. The specimen was in my control until the collector packaged the specimen in the vials and applied the security seal(s). The information provided on this form and on the labels affixed to the specimen bottles are correct. I hereby authorize the testing laboratory to release the results of the test to the designated designee.

Donor's Signatur Date

Drug Testing Custody and Control Form
Testing Authority: Neural Ataletic Commission In Urine Blood Passport & Blood hGH In Out of Competition In Competition Additional Information: UFC
To be completed and verified by collector/validator: Collector's Name: Curfts Validator's Name: Curfts Sport: Collection Dotor's Gender: Male Female Optional On site Specimen Assessment:
Validator Affidavit: I certify that I witnessed the donor during the collection process. The collection container and specimen remained in control of the donor throughout this process and remained in constant view of the donor and me. X
Collector Affidavit: I certify that the donor provided the specimen on this date in accordance with specified collection procedures. I further certify the specimen was given to me by the donor and was packaged and sealed and will be given to entity identified below. x
Courier: Waybill/Airbill# Other:
To be completed by Laboratory: Received By:
Accessioner's Signature date/time Accessioner PRINT Name
Specimen Vial Seals Intact: YES NO
To be completed by collector and verified by donor: (not to be included on lab copy)
Donor's Name Donor's ID #
Donor Affidavit: I certify that I provided this specimen. The specimen was in my control until the collector packaged the specimen in the vials and applied the security seal(s). The information provided on this form and on the labels affixed to

specimen in the vials and applied the security seal(s). The information provided on this form and on the labels affixed to the specimen bottles are correct. I hereby authorize the testing laboratory to release the results of the test to the designated designee. By signing below, I hereby accept the risk of adverse public notice of the test results, embarrassment, criticism, financial

Qonor's Signature Date



CONFIDENTIAL TEST REPORT

Christopher A. Eccles Attorney General of Nevada 555 E. Washington Ave., Suite 3900 Las Vegas, NV 89101

Program:	WADA Full Menu	Collection Date:	7/11/2015
Lab ID:	303544 Lab Receipt Date:		7/13/2015
Specimen ID:	S008080772	Report Date:	7/30/2015
Test type:	In competition	Gender:	Male
Mission Ref#:	UFC189	Sample Matrix:	Urine
Sport:	Mixed Martial Arts	pH:	7.7
Discipline:	Mixed Martial Arts	Specific Gravity:	1.007
Container:	A Bottle 303544-1		

Analysis Requested: Specimen was analyzed for Anabolic Agents (S1); Peptide Hormones, Growth Factors and Related Substances (S2); Beta-2 Agonists (S3); Hormone and Metabolic Modulators (S4); Diuretics and Other Masking Agents (S5); Stimulants (S6); Narcotics (S7); Cannabinoids (S8) and Glucocorticosteroids (S9) using GC/MS, LC/MS and Immunoassay test methods.

Result: No Prohibited Substance(s) or Prohibited Method(s), or their Metabolite(s) or Marker(s) on the test menu were detected.

Unless otherwise noted the condition of the specimen was acceptable when received at the laboratory.

Endogenous Steroid Data (screen):							
Andro	Etio	DHEA	Ері	Test	T/E	5α-diol	5β-diol
390 ng/mL	420 ng/mL	5.3 ng/mL	7.4 ng/mL	3.1 ng/mL	.42	<loq< td=""><td>36 ng/mL</td></loq<>	36 ng/mL

Michael J. Madsen

1/ the

Thursday, July 30, 2015

Date

Certified By

Signature

Accredited by the World Anti-Doping Agency as compliant with the requirements of the World Anti-Doping Code.

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CONFIDENTIAL TEST REPORT

Christopher A. Eccles Attorney General of Nevada 555 E. Washington Ave., Suite 3900 Las Vegas, NV 89101

Program:	WADA Full Menu	Collection Date:	7/11/2015
Lab ID:	303543 Lab Receipt Date:		7/13/2015
Specimen ID:	S008080681	Report Date:	7/30/2015
Test type:	In competition	Gender:	Male
Mission Ref#:	UFC189	Sample Matrix:	Urine
Sport:	Mixed Martial Arts	pH:	6.2
Discipline:	Mixed Martial Arts	Specific Gravity:	1.014
Container:	A Bottle 303543-1		

Analysis Requested: Specimen was analyzed for Anabolic Agents (S1); Peptide Hormones, Growth Factors and Related Substances (S2); Beta-2 Agonists (S3); Hormone and Metabolic Modulators (S4); Diuretics and Other Masking Agents (S5); Stimulants (S6); Narcotics (S7); Cannabinoids (S8) and Glucocorticosteroids (S9) using GC/MS, LC/MS and Immunoassay test methods.

Result: No Prohibited Substance(s) or Prohibited Method(s), or their Metabolite(s) or Marker(s) on the test menu were detected.

Unless otherwise noted the condition of the specimen was acceptable when received at the laboratory.

Endogenous Steroid Data (screen):							
Andro	Etio	DHEA	Ері	Test	T/E	5α-diol	5β-diol
1500 ng/mL	1300 ng/mL	26 ng/mL	22 ng/mL	13 ng/mL	.6	23 ng/mL	110 ng/mL

Michael J. Madsen

1 the

Thursday, July 30, 2015

Date

Certified By

Signature

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CONFIDENTIAL TEST REPORT

Christopher A. Eccles Attorney General of Nevada 555 E. Washington Ave., Suite 3900 Las Vegas, NV 89101

Program:	Complete Blood Count	
Lab ID:	302753	La
Specimen ID:	S008080699	
Test type:	In competition	
Mission Ref#:	UFC 189 Post Fight	
Sport:	Mixed Martial Arts	
Discipline:	Mixed Martial Arts	
Container:	Whole Blood Tube - A 302753-1	

Collection Date: 7/11/2015 Lab Receipt Date: 7/13/2015 Report Date: 7/16/2015 Gender: Male Sample Matrix: Blood

Analysis Requested: Specimen was analyzed for hematological parameters.

Unless otherwise noted the condition of the specimen was acceptable when received at the laboratory.

Parameter	Analysis
Instrument: XT-2000i #1	Date: 13-Jul-2015 14:52
Red blood cells	4.39 10^6/uL
Hemoglobin	13.2 g/dL
Hematocrit	39.2 %
Mean corpuscular volume	89.3 fL
Mean corpuscular hemoglobin	30.1 pg
Mean corpuscular hb concentr.	33.7 g/dL
Reticulocyte percentage	0.87 %
Reticulocyte number	0.0382 10^6/uL
RDW Standard Deviation	39.9 fL
Immature Reticulocyte Fraction	3.8 %
Off-Score	76.0

Judy Field

July 2. Juil

Thursday, July 16, 2015

Date

Certified By

Signature

Accredited by the World Anti-Doping Agency as compliant with the requirements of the World Anti-Doping Code.

Accredited by the American Association for Laboratory Accreditation as compliant with the requirements of ISO/IEC 17025, Testing Certificate 2500.01.



CONFIDENTIAL TEST REPORT

Christopher A. Eccles Attorney General of Nevada 555 E. Washington Ave., Suite 3900 Las Vegas, NV 89101

0	Human Growth Hormone	Collection Date:	
Lab ID:		Lab Receipt Date:	
Specimen ID:	S008080707	Report Date:	7/16/2015
Test type:	In competition	Gender:	Male
Mission Ref#:	UFC 189 Post Fight	Sample Matrix:	Blood
Sport:	Mixed Martial Arts	_	
Discipline:	Mixed Martial Arts		
Container:	Serum Separator Tube - A 302759-1		
Result:	Specimen was analyzed for Peptide Ho including Growth Hormone (hGH) usin No Prohibited Substance(s) or Prohibit test menu were detected. vise noted the condition of the specimen	g Immunoassay test methods. ed Method(s), or their Metabo	olite(s) or Marker(s) on the
Uniess Utierv		i was acceptable when receive	ω at the laboratory.
H Data:			

hGH ratio .625 X:1 hGH Kit 2

Judy Field

Jung 2. Juil

Thursday, July 16, 2015

Date

Certified By

hGH

Signature

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Accredited by the American Association for Laboratory Accreditation as compliant with the requirements of ISO/IEC 17025, Testing Certificate 2500.01.

The results contained herein relate only to the items tested. This report shall not be reproduced, except in full, without the expressed written consent of the Laboratory.

Drug Testin	g Custody and Control Form	
Testing Authority: <u>Nevala</u> Au AUrine Blood Passport Blood hG Out of Competition Aln Com Additional Information: <u>UFC 189</u>	H Specimen ID:	5 2 0 EN ID NO.
To be completed and verified by collect Collector's Name:W Validator's Name:W Sport: Optional On site Specimen Assessment: Sp	Collection Date: $7/11/15$ Sec/ Donor's Gender: X Male \Box Female	_
	donor during the collection process. The collection container and bughout this process and remained in constant view of the donor and me	3.
	ided the specimen on this date in accordance with specified collection given to me by the donor and was packaged and sealed and will be given $\frac{2/11/5}{Date} = \frac{5:17}{Time} \text{ ampm}$	
To be completed by Laboratory: Received By:	date/time Accessioner PRINT Name	
Specimen Vial Seals Intact: YES		
To be completed by collector and	verified by donor: (not to be included on lab copy)	_

JEANIS Donor's Name

Donor's ID #

<u>Donor Affidavit</u>: I certify that I provided this specimen. The specimen was in my control until the collector packaged the specimen in the vials and applied the security seal(s). The information provided on this form and on the labels affixed to the specimen bottles are correct. I hereby authorize the testing laboratory to release the results of the test to the designated designee.

for's Signature Date

Drug Testing Custody and Control Form
Testing Authority: Nevada Athletic Commission & Urine Blood Passport Blood hGH Dut of Competition & In Competition Additional Information: UFC 189 Dest Fight Additional Information: UFC 189
To be completed and verified by collector/validator: Collector's Name: Image: Collection Date: Validator's Name: Image: Collection Date: Validator's Name: Image: Collection Date: Sport: Image: Collection Date: Optional On site Specimen Assessment: Specific Gravity:
Validator Affidavit: I certify that I witnessed the donor during the collection process. The collection container and specimen remained in constant view of the donor and me. X
Collector Affidavit: I certify that the donor provided the specimen on this date in accordance with specified collection procedures. I further certify the specimen was given to me by the donor and was packaged and sealed and will be given to entity identified below. X X Z Z Z Z Z Z Z Z Z Z
GSMRTL (by hand delivery) Courier: Other:
To be completed by Laboratory: Received By: Accessioner's Signature date/time Accessioner PRINT Name
Specimen Vial Seals Intact: 🗆 YES 🖾 NO
To be completed by collector and verified by donor: (not to be included on lab copy)
Dennis Bemudez Donor's Name Donor's ID #

<u>Donor Affidavit</u>: I certify that I provided this specimen. The specimen was in my control until the collector packaged the specimen in the vials and applied the security seal(s). The information provided on this form and on the labels affixed to the specimen bottles are correct. I hereby authorize the testing laboratory to release the results of the test to the designated designee.

Date Donor's Signature

Drug Testing Custody and Control Form
Testing Authority: Nevada Attaletic Commission Durine Kalood Passport Delood hGH Specimen ID: Out of Competition Kin Competition Additional Information: UFC 189 Testing Authority: Commission Pre Fight Specimen ID: Pre Fight Specimen ID: Pr
To be completed and verified by collector/validator: Collector's Name: Image: Collector/validator: Validator's Name: Image: Collector/validator: Sport: Image: Collector/validator: Optional On site Specimen Assessment: Specific Gravity:
Validator Affidavit: I certify that I witnessed the donor during the collection process. The collection container and specimen remained in control of the donor throughout this process and remained in constant view of the donor and me. X
Collector Affidavit: I certify that the donor provided the specimen on this date in accordance with specified collection procedures. I further certify the specimen was given to me by the donor and was packaged and sealed and will be given to entity identified below. X A_{Date} B_{C}^{2} A_{Date} Date Time
Specimen to be released to: XSMRTL (by hand delivery) Courier: Waybill/Airbill# Other:
To be completed by Laboratory: Received By: Accessioner's Signature date/time Accessioner PRINT Name Specimen Vial Seals Intact:
To be completed by collector and verified by donor: (not to be included on lab copy)
Donor's Name Donor's ID # <u>Donor Affidavit:</u> I certify that I provided this specimen. The specimen was in my control until the collector packaged the specimen in the vials and applied the security seal(s). The information provided on this form and on the labels affixed to the specimen bottles are correct. I hereby authorize the testing laboratory to release the results of the test to the designated designee.

Donor's Signature Date

Drug Testing Custody and Control Form
Testing Authority: <u>Neuada</u> <u>Attetic</u> <u>COMMISSION</u> Durine Delood Passport & Blood hGH Out of Competition X In Competition Additional Information: <u>UFC 187</u> Pre Fight Source Fight
To be completed and verified by collector/validator: Collector's Name: (value) Validator's Name: (value) Sport: Pro 'MTA- We for a control of the second
Validator Affidavit: I certify that I witnessed the donor during the collection process. The collection container and specimen remained in control of the donor throughout this process and remained in constant view of the donor and me.
Collector Affidavit: I certify that the donor provided the specimen on this date in accordance with specified collection procedures. I further certify the specimen was given to me by the donor and was packaged and sealed and will be given to entity identified below: x Collector's Signature Specimen to be released to: X SMRTL (by hand delivery) Courier: Waybill/Airbill#
To be completed by Laboratory: Received By:
Specimen Vial Seals Intact: 🗆 YES 🗆 NO
To be completed by collector and verified by donor: (not to be included on lab copy)

Donor's Name

Donor's ID #

<u>Donor Affidavit</u>: I certify that I provided this specimen. The specimen was in my control until the collector packaged the specimen in the vials and applied the security seal(s). The information provided on this form and on the labels affixed to the specimen bottles are correct. I hereby authorize the testing laboratory to release the results of the test to the designated designee.

Donor's Signature



CONFIDENTIAL TEST REPORT

Christopher A. Eccles Attorney General of Nevada 555 E. Washington Ave., Suite 3900 Las Vegas, NV 89101

Program:	WADA Full Menu	Collection Date:	7/11/2015
Lab ID:	303546	Lab Receipt Date:	7/13/2015
Specimen ID:	S006205520	Report Date:	7/30/2015
Test type:	In competition	Gender:	Male
Mission Ref#:	UFC189	Sample Matrix:	Urine
Sport:	Mixed Martial Arts	pH:	5.9
Discipline:	Mixed Martial Arts	Specific Gravity:	1.016
Container:	A Bottle 303546-1		

Analysis Requested: Specimen was analyzed for Anabolic Agents (S1); Peptide Hormones, Growth Factors and Related Substances (S2); Beta-2 Agonists (S3); Hormone and Metabolic Modulators (S4); Diuretics and Other Masking Agents (S5); Stimulants (S6); Narcotics (S7); Cannabinoids (S8) and Glucocorticosteroids (S9) using GC/MS, LC/MS and Immunoassay test methods.

Result: No Prohibited Substance(s) or Prohibited Method(s), or their Metabolite(s) or Marker(s) on the test menu were detected.

Unless otherwise noted the condition of the specimen was acceptable when received at the laboratory.

Endogenous Steroid Data (screen):							
Andro	Etio	DHEA	Ері	Test	T/E	5α-diol	5β-diol
2900 ng/mL	1400 ng/mL	11 ng/mL	12 ng/mL	15 ng/mL	1.3	42 ng/mL	60 ng/mL

Michael J. Madsen

1/ the

Thursday, July 30, 2015

Date

Certified By

Signature

Accredited by the World Anti-Doping Agency as compliant with the requirements of the World Anti-Doping Code.

Accredited by the American Association for Laboratory Accreditation as compliant with the requirements of ISO/IEC 17025, Testing Certificate 2500.01.

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CONFIDENTIAL TEST REPORT

Christopher A. Eccles Attorney General of Nevada 555 E. Washington Ave., Suite 3900 Las Vegas, NV 89101

Program:	WADA Full Menu	Collection Date:	7/11/2015
Lab ID:	303538	Lab Receipt Date:	7/13/2015
Specimen ID:	S008083198	Report Date:	7/30/2015
Test type:	In competition	Gender:	Male
Mission Ref#:	UFC189	Sample Matrix:	Urine
Sport:	Mixed Martial Arts	pH:	5.2
Discipline:	Mixed Martial Arts	Specific Gravity:	1.015
Container:	A Bottle 303538-1		

Analysis Requested: Specimen was analyzed for Anabolic Agents (S1); Peptide Hormones, Growth Factors and Related Substances (S2); Beta-2 Agonists (S3); Hormone and Metabolic Modulators (S4); Diuretics and Other Masking Agents (S5); Stimulants (S6); Narcotics (S7); Cannabinoids (S8) and Glucocorticosteroids (S9) using GC/MS, LC/MS and Immunoassay test methods. Description Image: Image Additional Action of the image Additional Action of the image Additional Actional Actionactionactina Actional Actional Actional Actionactiona

Result: No Prohibited Substance(s) or Prohibited Method(s), or their Metabolite(s) or Marker(s) on the test menu were detected.

Unless otherwise noted the condition of the specimen was acceptable when received at the laboratory.

Endogenous Steroid Data (screen):							
Andro	Etio	DHEA	Ері	Test	T/E	5α-diol	5β-diol
1600 ng/mL	670 ng/mL	43 ng/mL	7.5 ng/mL	14 ng/mL	1.8	44 ng/mL	38 ng/mL

Michael J. Madsen

1 du

Thursday, July 30, 2015

Date

Certified By

Signature

Accredited by the World Anti-Doping Agency as compliant with the requirements of the World Anti-Doping Code.

Accredited by the American Association for Laboratory Accreditation as compliant with the requirements of ISO/IEC 17025, Testing Certificate 2500.01.



CONFIDENTIAL TEST REPORT

Christopher A. Eccles Attorney General of Nevada 555 E. Washington Ave., Suite 3900 Las Vegas, NV 89101

Program:	Complete Blood Count
Lab ID:	302754
Specimen ID:	S006205538
Test type:	In competition
Mission Ref#:	UFC 189 Post Fight
Sport:	Mixed Martial Arts
Discipline:	Mixed Martial Arts
Container:	Whole Blood Tube - A 302754-1

Collection Date: 7/11/2015 Lab Receipt Date: 7/13/2015 Report Date: 7/16/2015 Gender: Male Sample Matrix: Blood

Analysis Requested: Specimen was analyzed for hematological parameters.

Unless otherwise noted the condition of the specimen was acceptable when received at the laboratory.

Parameter	Analysis
Instrument: XT-2000i #1	Date: 13-Jul-2015 14:55
Red blood cells	4.46 10^6/uL
Hemoglobin	14.6 g/dL
Hematocrit	42.5 %
Mean corpuscular volume	95.3 fL
Mean corpuscular hemoglobin	32.7 pg
Mean corpuscular hb concentr.	34.4 g/dL
Reticulocyte percentage	0.88 %
Reticulocyte number	0.0392 10^6/uL
RDW Standard Deviation	40.8 fL
Immature Reticulocyte Fraction	10.5 %
Off-Score	89.7

Judy Field

July 2. Juil

Thursday, July 16, 2015

Date

Certified By

Signature

Accredited by the World Anti-Doping Agency as compliant with the requirements of the World Anti-Doping Code.

Accredited by the American Association for Laboratory Accreditation as compliant with the requirements of ISO/IEC 17025, Testing Certificate 2500.01.



CONFIDENTIAL TEST REPORT

Christopher A. Eccles Attorney General of Nevada 555 E. Washington Ave., Suite 3900 Las Vegas, NV 89101

Program:	Human Growth Hormone	Collection Date:	7/11/2015
Lab ID:	302758	Lab Receipt Date:	7/13/2015
Specimen ID:	S006205967	Report Date:	7/16/2015
Test type:	In competition	Gender:	Male
Mission Ref#:	UFC 189 Post Fight	Sample Matrix:	Blood
Sport:	Mixed Martial Arts	•	
Discipline:	Mixed Martial Arts		
Container:	Serum Separator Tube - A 302758-1		
Analysis Requested:	Specimen was analyzed for Peptide Ho	mones. Growth Factors and I	Related Substances (S2)
Result:	including Growth Hormone (hGH) using	Immunoassay test methods.	
Unless other	vise noted the condition of the specimen	was acceptable when receive	ed at the laboratory.
H Data:			

hGH ratio .558 X:1 hGH Kit 2

Judy Field

Jung 2. Juil

Thursday, July 16, 2015

Date

Certified By

hGH

Signature

Accredited by the World Anti-Doping Agency as compliant with the requirements of the World Anti-Doping Code.

Accredited by the American Association for Laboratory Accreditation as compliant with the requirements of ISO/IEC 17025, Testing Certificate 2500.01.

The results contained herein relate only to the items tested. This report shall not be reproduced, except in full, without the expressed written consent of the Laboratory.

Drug Testing Custody and Control Form
Testing Authority: Neuada Athletic Commission & Urine Blood Passport Blood hGH Dut of Competition In Competition Additional Information: UFC 189
To be completed and verified by collector/validator: Collector's Name: WHS Validator's Name: WHS Validator's Name: WHS Sport: PTO - MMA - WFC Optional On site Specimen Assessment: Specific Gravity:
<u>Validator Affidavit</u> : I certify that I witnessed the donor during the collection process. The collection container and specifien remained in control of the donor throughout this process and remained in constant view of the donor and me. X
$\frac{\text{Collector Affidavit: I certify that the donor provided the specimen on this date in accordance with specified collection procedures. I further certify the specimen was given to me by the donor and was packaged and sealed and will be given to entity identified below. X \frac{1}{1115} \frac{1}{15} \frac$
Specimen to be released to: SMRTL (by hand delivery) Courier: Waybill/Airbill# Other:
To be completed by Laboratory: Received By:
Accessioner's Signature date/time Accessioner PRINT Name Specimen Vial Seals Intact: YES NO
To be completed by collector and verified by donor: (not to be included on lab copy)

Donor's Name

Donor's ID #

Donor Affidavit: I certify that I provided this specimen. The specimen was in my control until the collector packaged the specimen in the vials and applied the security seal(s). The information provided on this form and on the labels affixed to the specimen bottles are correct. I hereby authorize the testing laboratory to release the results of the test to the designated designee.

Donor's Signature

07/11/5 Date

Drug Testing Custody and Control Form	
Testing Authority: Nevada Attaletic Commission &Urine Blood Passport Blood hGH Specimen ID: Dut of Competition Aln Competition Additional Information: UFC 189	S008080632 SPECIMEN ID NO.
To be completed and verified by collector/validator: Collector's Name: Image: Collector Section Date: Validator's Name: Image: Collector Section Date: Validator's Name: Image: Collector Section Date: Sport: Image: Collection Date: Optional On site Specimen Assessment: Specific Gravity:	$\frac{11}{15}$ e \Box Female
Validator Affidavit: I certify that I witnessed the donor during the collection process. The collection process and remained in constant vertices and remained in constant verti	
Collector Affidavit: I certify that the donor provided the specimen on this date in accordance will procedures. I further certify the specimen was given to me by the donor and was packaged and to entity identified below. X	sealed and will be given
Other: To be completed by Laboratory: Received By:	
Accessioner's Signature date/time Accessioner F	PRINT Name
Specimen Vial Seals Intact: YES NO	· · · · · · · · · · · · · · · · · · ·
To be completed by collector and verified by donor: (not to be included a Rory MacDonald	on lab copy)
Donor's ID #	
the second s	

<u>Donor Affidavit</u>: I certify that I provided this specimen. The specimen was in my control until the collector packaged the specimen in the vials and applied the security seal(s). The information provided on this form and on the labels affixed to the specimen bottles are correct. I hereby authorize the testing laboratory to release the results of the test to the designated designee.

By signing below, I hereby accept the risk of adverse public notice of the test results, embarrassment, criticism, financial loss or other action, and expressly waive any claims for damages as a result thereof. Public release of the test results does not impose liability for defamation or constitute a ground for recovery in a civil action.

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Donor's Signature

Date

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Drug Testing Custody and Control Form
Testing Authority: Nevala Athletic Commission Durine & Blood Passport Delood hGH Out of Competition & In Competition Additional Information: UFC 189
To be completed and verified by collector/validator: Collector's Name: Iw Collector/validator: Validator's Name: Collector's Name: Collector's Gender: Sport: Collection Date: Collection Date: Optional On site Specimen Assessment: Specific Gravity: PH:
Validator Affidavit: I certify that I witnessed the donor during the collection process. The collection container and specimer remained in control of the donor throughout this process and remained in constant view of the donor and me. X Y Validator's Signature Validator's Signature
<u>Collector Affidavit:</u> I certify that the donor provided the specimen on this date in accordance with specified collection procedures. I further certify the specimen was given to me by the donor and was packaged and sealed and will be given to entity identified below. $X = \frac{24465}{Date} = \frac{11.30}{Time}$ am/pm Specimen to be released to:
SMRTL (by hand delivery) □ Courier: Waybill/Airbill# □ Other:
To be completed by Laboratory: Received By: Accessioner's Signature date/time Accessioner PRINT Name
Specimen Vial Seals Intact: 🗆 YES 🖾 NO
To be completed by collector and verified by donor: (not to be included on lab copy) Rony Mac Donold Donor's Name Donor's ID #
Donor Affidavit: I certify that I provided this specimen. The specimen was in my control until the collector packaged the specimen in the vials and applied the security seal(s). The information provided on this form and on the labels affixed to the specimen bottles are correct. I hereby authorize the testing laboratory to release the results of the test to the designated designee.

By signing below, I hereby accept the risk of adverse public notice of the test results, embarrassment, criticism, financial loss or other action, and expressly waive any claims for damages as a result thereof. Public release of the test results does not impose liability for defamation or constitute a ground for recovery in a civil action.

Q In

Date

Donor's Signature

Х

Drug Testing Custody and Control Form
Testing Authority: Newsda Athletic Commission In Urine Blood Passport & Blood hGH Specimen ID: Specimen ID: In Out of Competition Aln Competition Pre Fight S006205546 Additional Information: UFC 189
To be completed and verified by collector/validator: Collector's Name: IN Collector/validator: Validator's Name: IN Collector/validator: Validator's Name: IN Collection Sport: IN IN Optional On site Specimen Assessment: Specific Gravity: p/:
Validator Affidavit: I certify that I witnessed the donor during the collection process. The collection container and specimen remained in constant view of the donor and me. X
<u>Collector Affidavit:</u> I certify that the donor provided the specimen on this date in accordance with specified collection procedures. I further certify the specimen was given to me by the donor and was packaged and sealed and will be given to entity identified below. $X = \frac{7}{11} \frac{1}{5} \frac{11}{5} \frac{30}{11} \text{ am/pm}$
Specimen to be released to: SMRTL (by hand delivery) Courier: Waybill/Airbill# Other:
To be completed by Laboratory:
Received By:
Specimen Vial Seals Intact: 🗆 YES 🗆 NO
To be completed by collector and verified by donor: (not to be included on lab copy)
BORY MacDonald Donor's Name Donor's ID #
Donor Affidavit: I certify that I provided this specimen. The specimen was in my control until the collector packaged the

specimen in the vials and applied the security seal(s). The information provided on this form and on the labels affixed to the specimen bottles are correct. I hereby authorize the testing laboratory to release the results of the test to the designated designee.

Х

Donor's Signature

Date



CONFIDENTIAL TEST REPORT

Christopher A. Eccles Attorney General of Nevada 555 E. Washington Ave., Suite 3900 Las Vegas, NV 89101

Program:	WADA Full Menu	Collection Date:	7/11/2015
Lab ID:	303545	Lab Receipt Date:	7/13/2015
Specimen ID:	S008080715	Report Date:	7/30/2015
Test type:	In competition	Gender:	Male
Mission Ref#:	UFC189	Sample Matrix:	Urine
Sport:	Mixed Martial Arts	pH:	7.0
Discipline:	Mixed Martial Arts	Specific Gravity:	1.003
Container:	A Bottle 303545-1		

Analysis Requested: Specimen was analyzed for Anabolic Agents (S1); Peptide Hormones, Growth Factors and Related Substances (S2); Beta-2 Agonists (S3); Hormone and Metabolic Modulators (S4); Diuretics and Other Masking Agents (S5); Stimulants (S6); Narcotics (S7); Cannabinoids (S8) and Glucocorticosteroids (S9) using GC/MS, LC/MS and Immunoassay test methods.

Result: No Prohibited Substance(s) or Prohibited Method(s), or their Metabolite(s) or Marker(s) on the test menu were detected.

Unless otherwise noted the condition of the specimen was acceptable when received at the laboratory.

Endogenous	Steroid Data ((screen):					
Andro	Etio	DHEA	Ері	Test	T/E	5α-diol	5β-diol
230 ng/mL	150 ng/mL	2.7 ng/mL	4.3 ng/mL	3.6 ng/mL	.83	<loq< td=""><td>22 ng/mL</td></loq<>	22 ng/mL

Michael J. Madsen

1/ the

Thursday, July 30, 2015

Date

Certified By

Signature

Accredited by the World Anti-Doping Agency as compliant with the requirements of the World Anti-Doping Code.

Accredited by the American Association for Laboratory Accreditation as compliant with the requirements of ISO/IEC 17025, Testing Certificate 2500.01.



CONFIDENTIAL TEST REPORT

Christopher A. Eccles Attorney General of Nevada 555 E. Washington Ave., Suite 3900 Las Vegas, NV 89101

Program:	WADA Full Menu	Collection Date:	7/11/2015
Lab ID:	303542	Lab Receipt Date:	7/13/2015
Specimen ID:	S008080632	Report Date:	7/30/2015
Test type:	In competition	Gender:	Male
Mission Ref#:	UFC189	Sample Matrix:	Urine
Sport:	Mixed Martial Arts	pH:	5.0
Discipline:	Mixed Martial Arts	Specific Gravity:	1.016
Container:	A Bottle 303542-1		

Analysis Requested: Specimen was analyzed for Anabolic Agents (S1); Peptide Hormones, Growth Factors and Related Substances (S2); Beta-2 Agonists (S3); Hormone and Metabolic Modulators (S4); Diuretics and Other Masking Agents (S5); Stimulants (S6); Narcotics (S7); Cannabinoids (S8) and Glucocorticosteroids (S9) using GC/MS, LC/MS and Immunoassay test methods.

Result: No Prohibited Substance(s) or Prohibited Method(s), or their Metabolite(s) or Marker(s) on the test menu were detected.

Unless otherwise noted the condition of the specimen was acceptable when received at the laboratory.

Endogenous	Steroid Data ((screen):					
Andro	Etio	DHEA	Ері	Test	T/E	5α-diol	5β-diol
1700 ng/mL	1200 ng/mL	83 ng/mL	24 ng/mL	35 ng/mL	1.4	63 ng/mL	180 ng/mL

Michael J. Madsen

1/ Ma

Thursday, July 30, 2015

Date

Certified By

Signature

Accredited by the World Anti-Doping Agency as compliant with the requirements of the World Anti-Doping Code.

Accredited by the American Association for Laboratory Accreditation as compliant with the requirements of ISO/IEC 17025, Testing Certificate 2500.01.

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CONFIDENTIAL TEST REPORT

Christopher A. Eccles Attorney General of Nevada 555 E. Washington Ave., Suite 3900 Las Vegas, NV 89101

Program:	Complete Blood Count
Lab ID:	302752
Specimen ID:	S006205561
Test type:	In competition
Mission Ref#:	UFC 189 Post Fight
Sport:	Mixed Martial Arts
Discipline:	Mixed Martial Arts
Container:	Whole Blood Tube - A 302752-1

Collection Date: 7/11/2015 Lab Receipt Date: 7/13/2015 Report Date: 7/16/2015 Gender: Male Sample Matrix: Blood

Analysis Requested: Specimen was analyzed for hematological parameters.

Unless otherwise noted the condition of the specimen was acceptable when received at the laboratory.

Parameter	Analysis
Instrument: XT-2000i #1	Date: 13-Jul-2015 14:50
Red blood cells	4.28 10^6/uL
Hemoglobin	13.2 g/dL
Hematocrit	38.3 %
Mean corpuscular volume	89.5 fL
Mean corpuscular hemoglobin	30.8 pg
Mean corpuscular hb concentr.	34.5 g/dL
Reticulocyte percentage	0.85 %
Reticulocyte number	0.0364 10^6/uL
RDW Standard Deviation	40.2 fL
Immature Reticulocyte Fraction	7.3 %
Off-Score	76.7

Judy Field

July 2. Juil

Thursday, July 16, 2015

Date

Certified By

Signature

Accredited by the World Anti-Doping Agency as compliant with the requirements of the World Anti-Doping Code.

Accredited by the American Association for Laboratory Accreditation as compliant with the requirements of ISO/IEC 17025, Testing Certificate 2500.01.



CONFIDENTIAL TEST REPORT

Christopher A. Eccles Attorney General of Nevada 555 E. Washington Ave., Suite 3900 Las Vegas, NV 89101

Program:	Human Growth Hormone	Collection Date:	7/11/2015
Lab ID:	302757	Lab Receipt Date:	7/13/2015
Specimen ID:	S006205546	Report Date:	7/16/2015
Test type:	In competition	Gender:	Male
Mission Ref#:	UFC 189 Post Fight	Sample Matrix:	Blood
Sport:	Mixed Martial Arts	-	
Discipline:	Mixed Martial Arts		
Container:	Serum Separator Tube - A 302757-1		
Result:	Specimen was analyzed for Peptide Hor including Growth Hormone (hGH) using No Prohibited Substance(s) or Prohibite test menu were detected. wise noted the condition of the specimen	Immunoassay test methods. d Method(s), or their Metabo	olite(s) or Marker(s) on the
H Data:			

hGH ratio .564 X:1 hGH Kit 2

Judy Field

Jung 2. Juil

Signature

Thursday, July 16, 2015

Certified By

hGH

Date

Accredited by the World Anti-Doping Agency as compliant with the requirements of the World Anti-Doping Code.

Accredited by the American Association for Laboratory Accreditation as compliant with the requirements of ISO/IEC 17025, Testing Certificate 2500.01.

The results contained herein relate only to the items tested. This report shall not be reproduced, except in full, without the expressed written consent of the Laboratory.

Drug Testing Custody and Control Form
Testing Authority: Nevada Athetic Commission VIrine Blood Passport Blood hGH Specimen ID: Out of Competition XIn Competition Pre Fight S007232721 Additional Information: UFC 189 Post Fight SPECIMEN ID NO.
To be completed and verified by collector/validator: Collector's Name: Image: Collector/validator: Validator's Name: Image: Collector/validator: Validator's Name: Image: Collector/validator: Sport: Collection Date: 7/11/15 Optional On site Specimen Assessment: Specific Gravity:
Validator Affidavit: I certify that I witnessed the donor during the collection process. The collection container and specimen remained in control of the donor throughout this process and remained in constant view of the donor and me. X 7/11/15 Validator's Signature Date
Collector Affidavit: I certify that the donor provided the specimen on this date in accordance with specified collection procedures. I further certify the specimen was given to me by the donor and was packaged and sealed and will be given to entity identified below. X
To be completed by Laboratory: Received By:
To be completed by collector and verified by donor: (not to be included on lab copy) Robert Lawler Donor's Name Donor's ID #

<u>Donor Affidavit</u>: I certify that I provided this specimen. The specimen was in my control until the collector packaged the specimen in the vials and applied the security seal(s). The information provided on this form and on the labels affixed to the specimen bottles are correct. I hereby authorize the testing laboratory to release the results of the test to the designated designee.

7.11., Donor's Signature Date

Drug Testing Custody and Control Form
Testing Authority: <u>Newada Athletic</u> Commission XUrine Blood Passport Blood hGH Specimen ID: Out of Competition XIn Competition Additional Information: <u>UFC 189</u>
To be completed and verified by collector/validator: Collector's Name: Image: Collection Date: Validator's Name: Image: Collector Section Date: Validator's Name: Image: Collector Section Date: Sport: Donor's Gender: Optional On site Specimen Assessment: Specific Gravity:
Validator Affidavit: I certify that I witnessed the donor during the collection process. The collection container and specimen remained in constant view of the donor and me. Specimen remained in constant view of the donor and me. Validator's Signature
Collector Affidavit: I certify that the donor provided the specimen on this date in accordance with specified collection procedures. I further certify the specimen was given to me by the donor and was packaged and sealed and will be given to entity identified below. X Image: Collector's Signature Specimen to be released to: Image: Collector's Signature V\$MRTL (by hand delivery) Image: Collector's Coll
To be completed by Laboratory:
Received By:
Accessioner's Signature date/time Accessioner PRINT Name Specimen Vial Seals Intact: YES NO
To be completed by collector and verified by donor: (not to be included on lab copy)
Robert Lawler
Donor's Name Donor's ID #
Donor Affidavit: I certify that I provided this specimen. The specimen was in my control until the collector packaged the specimen in the vials and applied the security seal(s). The information provided on this form and on the labels affixed to the specimen bottles are correct. I hereby authorize the testing laboratory to release the results of the test to the designated designee. By signing below, Linereby accept the risk of adverse public notice of the test results, embarrassment, criticism, financial loss or other action, and expressly waive any claims for damages as a result thereof. Public release of the test results
does not impose liability for defamation or constitute a ground for recovery in a civil action. X

Donor's Signature

Drug Testing Custody and Control Form
Testing Authority: <u>Nevada Athletic</u> Commission Durine XBlood Passport DBlood hGH Out of Competition XIn Competition Additional Information: <u>UFC 189</u> Testing Authority: <u>S008080756</u> XPost Fight SPECIMEN ID NO
To be completed and verified by collector/validator: Collector's Name: Control of the second seco
Validator Affidavit: I certify that I witnessed the donor during the collection process. The collection container and specimen remained in constant view of the donor and me. x OFINE OFINE Validator's Signature Date
Collector Affidavit: I certify that the donor provided the specimen on this date in accordance with specified collection procedures. I further certify the specimen was given to me by the donor and was packaged and sealed and will be given to entity identified below. x y x y Collector's Signature y Date Time Specimen to be released to: Waybill/Airbill#
□ Other: To be completed by Laboratory: Received By: Accessioner's Signature date/time Accessioner PRINT Name Specimen Vial Seals Intact: □ YES □ NO
To be completed by collector and verified by donor: (not to be included on lab copy) Robert Lawler Donor's Name Donor's ID #
Donor Affidavit: I certify that I provided this specimen. The specimen was in my control until the collector packaged the specimen in the vials and applied the security seal(s). The information provided on this form and on the labels affixed to the specimen bottles are correct. I hereby authorize the testing laboratory to release the results of the test to the designated designee.

Х Donor's Signature Date

Drug Testing Custody and Control Form

Additional Information: UFC 189	Specimen ID: re Fight ost Fight SD08080749 SPECIMEN ID NO.
To be completed and verified by collector/validator	
Collector's Name: Curr Suy	Collection Date: 07/11/15
Validator's Name: (wrrs Su)	Donor's Gender: 🕵 Male 🗆 Female
sport: Dro, MMA-11FC	Donor o Genaent panale Erenaio
Optional On site Specimen Assessment: Specific Gravity:	nH.
Optional of site specifien Assessment: specific oravity.	prii
Validator Affidavit: I certify that I witnessed the donor during	the collection process. The collection container and
specimen remained in control of the donor throughout this pr	
(A DI	article
x_UVVVV////	() 1 11 15
Validator's Signature	Date
Collector Affidavit: I certify that the donor provided the specir	
procedures. I further certify the specimen was given to me by	the donor and was packaged and sealed and will be given
to entity identified below.	
VINTA M	7 11/14 109:13 am(pm)
Collector's Signature	Time any pin
Specimen to be released to:	
SMRTL (by hand delivery)	-L114
입 Courier: Waybill/Ai	
To be completed by Laboratory:	
Received By:	
	e/time Accessioner PRINT Name
Accessioner's Signature dat	e/time Accessioner PRINT Name
	e/time Accessioner PRINT Name
Accessioner's Signature dat	
Accessioner's Signature dat Specimen Vial Seals Intact: YES NO	
Accessioner's Signature dat Specimen Vial Seals Intact: YES NO	
Accessioner's Signature dat Specimen Vial Seals Intact: To be completed by collector and verified by Robert Lawler	donor: (not to be included on lab copy)
Accessioner's Signature dat Specimen Vial Seals Intact: YES NO	
Accessioner's Signature dat Specimen Vial Seals Intact: YES NO To be completed by collector and verified by Robert Lawler Donor's Name	donor: (not to be included on lab copy)
Accessioner's Signature dat Specimen Vial Seals Intact: YES NO To be completed by collector and verified by Accessioner's Name Donor's Name Donor Affidavit: I certify that I provided this specimen. The specimen	donor: (not to be included on lab copy) Donor's ID # ecimen was in my control until the collector packaged the
Accessioner's Signature dat Specimen Vial Seals Intact: YES NO To be completed by collector and verified by Accessioner's Name Donor's Name Donor Affidavit: I certify that I provided this specimen. The spe specimen in the vials and applied the security seal(s). The info	donor: (not to be included on lab copy) Donor's ID # ecimen was in my control until the collector packaged the rmation provided on this form and on the labels affixed to
Accessioner's Signature dat Specimen Vial Seals Intact: YES NO To be completed by collector and verified by Accessioner's Name Donor's Name Donor Affidavit: I certify that I provided this specimen. The spe specimen in the vials and applied the security seal(s). The info the specimen bottles are correct. I hereby authorize the testin	donor: (not to be included on lab copy) Donor's ID # ecimen was in my control until the collector packaged the rmation provided on this form and on the labels affixed to
Accessioner's Signature dat Specimen Vial Seals Intact: YES NO To be completed by collector and verified by Accessioner's Name Donor's Name Donor Affidavit: I certify that I provided this specimen. The spe specimen in the vials and applied the security seal(s). The info the specimen bottles are correct. I hereby authorize the testin designated designee.	Donor's ID # ecimen was in my control until the collector packaged the rmation provided on this form and on the labels affixed to g laboratory to release the results of the test to the
Accessioner's Signature dat Specimen Vial Seals Intact: YES NO To be completed by collector and verified by Accessioner's Name Donor's Name Donor Affidavit: I certify that I provided this specimen. The spe specimen in the vials and applied the security seal(s). The info the specimen bottles are correct. I hereby authorize the testin designated designee. By signing below, I hereby accept the risk of adverse public no	donor: (not to be included on lab copy) Donor's ID # ecimen was in my control until the collector packaged the rmation provided on this form and on the labels affixed to g laboratory to release the results of the test to the tice of the test results, embarrassment, criticism, financial
Accessioner's Signature dat Specimen Vial Seals Intact: YES NO To be completed by collector and verified by Accessioner's Name Donor's Name Donor Affidavit: I certify that I provided this specimen. The specimen in the vials and applied the security seal(s). The info the specimen bottles are correct. I hereby authorize the testin designated designee. By signing below, I hereby accept the risk of adverse public no loss or other action, and expressly waive any claims for damage	Donor's ID # ecimen was in my control until the collector packaged the rmation provided on this form and on the labels affixed to g laboratory to release the results of the test to the tice of the test results, embarrassment, criticism, financial ges as a result thereof. Public release of the test results
Accessioner's Signature dat Specimen Vial Seals Intact: YES NO To be completed by collector and verified by Accessioner's Name Donor's Name Donor Affidavit: I certify that I provided this specimen. The spe specimen in the vials and applied the security seal(s). The info the specimen bottles are correct. I hereby authorize the testin designated designee. By signing below, I hereby accept the risk of adverse public no	Donor's ID # ecimen was in my control until the collector packaged the rmation provided on this form and on the labels affixed to g laboratory to release the results of the test to the tice of the test results, embarrassment, criticism, financial ges as a result thereof. Public release of the test results
Accessioner's Signature dat Specimen Vial Seals Intact: YES NO To be completed by collector and verified by Accession of the specimen of the specimen. The specimen of the specimen of the specimen bottles are correct. I hereby authorize the testing designated designee. By signing below, I hereby accept the risk of adverse public no loss or other action, and expressly waive any claims for damaged does not impose hability for defamation or constitute a ground the specimen in the vials of the speciment of the specimen bottles are correct. I hereby authorize the testing does not impose hability for defamation or constitute a ground the specimen in the speciment of the spec	Donor's ID # ecimen was in my control until the collector packaged the rmation provided on this form and on the labels affixed to g laboratory to release the results of the test to the tice of the test results, embarrassment, criticism, financial ges as a result thereof. Public release of the test results
Accessioner's Signature dat Specimen Vial Seals Intact: YES NO To be completed by collector and verified by Accessioner's Name Donor's Name Donor Affidavit: I certify that I provided this specimen. The specimen in the vials and applied the security seal(s). The info the specimen bottles are correct. I hereby authorize the testin designated designee. By signing below, I hereby accept the risk of adverse public no loss or other action, and expressly waive any claims for damage	Donor's ID # ecimen was in my control until the collector packaged the rmation provided on this form and on the labels affixed to g laboratory to release the results of the test to the tice of the test results, embarrassment, criticism, financial ges as a result thereof. Public release of the test results



CONFIDENTIAL TEST REPORT

Christopher A. Eccles Attorney General of Nevada 555 E. Washington Ave., Suite 3900 Las Vegas, NV 89101

Program:	WADA Full Menu	Collection Date:	7/11/2015
Lab ID:	303539	Lab Receipt Date:	7/13/2015
Specimen ID:	S007232721	Report Date:	7/30/2015
Test type:	In competition	Gender:	Male
Mission Ref#:	UFC189	Sample Matrix:	Urine
Sport:	Mixed Martial Arts	pH:	8.2
Discipline:	Mixed Martial Arts	Specific Gravity:	1.012
Container:	A Bottle 303539-1		

Analysis Requested: Specimen was analyzed for Anabolic Agents (S1); Peptide Hormones, Growth Factors and Related Substances (S2); Beta-2 Agonists (S3); Hormone and Metabolic Modulators (S4); Diuretics and Other Masking Agents (S5); Stimulants (S6); Narcotics (S7); Cannabinoids (S8) and Glucocorticosteroids (S9) using GC/MS, LC/MS and Immunoassay test methods. Description Image: Image Additional Action of the image Additional Action of the image Additional Actional Actionactionactina Actional Actional Actional Actionactiona

Result: No Prohibited Substance(s) or Prohibited Method(s), or their Metabolite(s) or Marker(s) on the test menu were detected.

Unless otherwise noted the condition of the specimen was acceptable when received at the laboratory.

Endogenous Steroid Data (screen):							
Andro	Etio	DHEA	Ері	Test	T/E	5α-diol	5β-diol
1200 ng/mL	990 ng/mL	35 ng/mL	6.5 ng/mL	11 ng/mL	1.7	53 ng/mL	140 ng/mL

Michael J. Madsen

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Thursday, July 30, 2015

Date

Certified By

Signature

Accredited by the American Association for Laboratory Accreditation as compliant with the requirements of ISO/IEC 17025, Testing Certificate 2500.01.



CONFIDENTIAL TEST REPORT

Christopher A. Eccles Attorney General of Nevada 555 E. Washington Ave., Suite 3900 Las Vegas, NV 89101

Program:	WADA Full Menu	Collection Date:	7/11/2015
Lab ID:	303527	Lab Receipt Date:	7/13/2015
Specimen ID:	S006205512	Report Date:	7/30/2015
Test type:	In competition	Gender:	Male
Mission Ref#:	UFC-189	Sample Matrix:	Urine
Sport:	Mixed Martial Arts	pH:	7.0
Discipline:	Mixed Martial Arts	Specific Gravity:	1.007
Container:	A Bottle 303527-1		

Analysis Requested: Specimen was analyzed for Anabolic Agents (S1); Peptide Hormones, Growth Factors and Related Substances (S2); Beta-2 Agonists (S3); Hormone and Metabolic Modulators (S4); Diuretics and Other Masking Agents (S5); Stimulants (S6); Narcotics (S7); Cannabinoids (S8) and Glucocorticosteroids (S9) using GC/MS, LC/MS and Immunoassay test methods.

Result: No Prohibited Substance(s) or Prohibited Method(s), or their Metabolite(s) or Marker(s) on the test menu were detected.

Unless otherwise noted the condition of the specimen was acceptable when received at the laboratory.

Endogenous Steroid Data (screen):							
Andro	Etio	DHEA	Ері	Test	T/E	5α-diol	5β-diol
600 ng/mL	570 ng/mL	30 ng/mL	3.1 ng/mL	6 ng/mL	2	28 ng/mL	60 ng/mL

Michael J. Madsen

1/ the

Thursday, July 30, 2015

Date

Certified By

Signature

Accredited by the American Association for Laboratory Accreditation as compliant with the requirements of ISO/IEC 17025, Testing Certificate 2500.01.



CONFIDENTIAL TEST REPORT

Christopher A. Eccles Attorney General of Nevada 555 E. Washington Ave., Suite 3900 Las Vegas, NV 89101

Program:	Complete Blood Count	C
Lab ID:	302748	Lal
Specimen ID:	\$008080756	
Test type:	In competition	
Mission Ref#:	UFC 189 Post Fight	
Sport:	Mixed Martial Arts	
Discipline:	Mixed Martial Arts	
Container:	Whole Blood Tube - A 302748-1	

Collection Date: 7/11/2015 Lab Receipt Date: 7/13/2015 Report Date: 7/16/2015 Gender: Male Sample Matrix: Blood

Analysis Requested: Specimen was analyzed for hematological parameters.

Unless otherwise noted the condition of the specimen was acceptable when received at the laboratory.

Parameter	Analysis
Instrument: XT-2000i #1	Date: 13-Jul-2015 14:48
Red blood cells	4.33 10^6/uL
Hemoglobin	12.9 g/dL
Hematocrit	39.4 %
Mean corpuscular volume	91.0 fL
Mean corpuscular hemoglobin	29.8 pg
Mean corpuscular hb concentr.	32.7 g/dL
Reticulocyte percentage	1.02 %
Reticulocyte number	0.0442 10^6/uL
RDW Standard Deviation	36.3 fL
Immature Reticulocyte Fraction	10.6 %
Off-Score	68.4

Judy Field

July 2. Juil

Thursday, July 16, 2015

Date

Certified By

Signature

Accredited by the World Anti-Doping Agency as compliant with the requirements of the World Anti-Doping Code.

Accredited by the American Association for Laboratory Accreditation as compliant with the requirements of ISO/IEC 17025, Testing Certificate 2500.01.



CONFIDENTIAL TEST REPORT

Christopher A. Eccles Attorney General of Nevada 555 E. Washington Ave., Suite 3900 Las Vegas, NV 89101

Program:	Human Growth Hormone	Collection Date:	7/11/2015	
Lab ID:	302756	Lab Receipt Date:	7/13/2015	
Specimen ID:	S008080749	Report Date:	7/21/2015	
Test type:	In competition	Gender:	Male	
Mission Ref#:	UFC 189 Post Fight	Sample Matrix:	Blood	
Sport:	Mixed Martial Arts			
Discipline:	Mixed Martial Arts			
Container:	Serum Separator Tube - A 302756-1			
Result:	Specimen was analyzed for Peptide Hormones, Growth Factors and Related Substances (S2) including Growth Hormone (hGH) using Immunoassay test methods.			
H Data:				

hGH ratio .607 X:1 hGH Kit 1

Judy Field

Jung 2. Juil

Tuesday, July 21, 2015

Date

Certified By

hGl

Signature

Accredited by the World Anti-Doping Agency as compliant with the requirements of the World Anti-Doping Code.

Accredited by the American Association for Laboratory Accreditation as compliant with the requirements of ISO/IEC 17025, Testing Certificate 2500.01.

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