

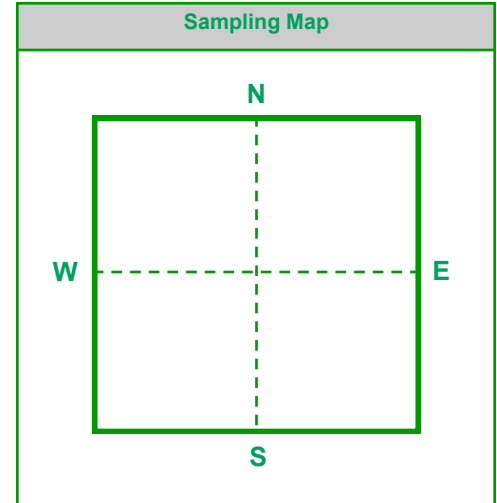


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# Plant Sample Submittal Information

You will receive a billing invoice with your results. Payment is due net 30.

PO # \_\_\_\_\_



Bill To Account:	
Name	
Address	
Phone	email

Sample Information	
Date	
Grower	
Field ID	

PLANT INFORMATION						Test Desired						
For Lab Use	Sample ID	Crop	Plant Part	Growth Stage	Plant Appearance	P-2	P-3	P-4	P-419	P-420	P-421	Individual Plant Analysis

Comments:

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Plant Analysis	
P-2	Routine
P-3	Super Complete
P-4	Stalk Nitrate
P-419	Cover Crop Routine
P-420	Cover Crop Super Complete
P-421	Cover Crop C:N