

PLANT TISSUE INFORMATION SHEET

	CUSTOMER INFORMATION													GROWER INFORMATION						
Account # Grower ID Farm ID											Field ID									
Please use column provided for specific pesticide/herbicide analysis requested. If additional room												n is needed for the pesticide/herbicide testing request, please use the								
	litional Tests or Other Information" box below. Lab Number Sample ID Individual Analysis									sis						Chloride (please use the Crop/Growth Stage				
(Lab Use Only)	(6 chars. max)	PT2	N	Ρ	к	Mg		Na				Mn	в	Cu	Zn	Nitrate-N	Chloride	(please use crop code)	se	
		-																		
Date/Time Collected	Sample ID	Pesticide/Herbicide F									de R	esidue					:	Signature of Sampler		
PT2 - Nitrogen, Pho													umir	านm	, Ma	inganese, l	Boron, Coppe	er, Zinc		
Pesticide/Herbicide a	-	D	ON	OT .	SUE	BMIT	PL.	ANT	TIS	SUL	E SA	MP	LES	IN I	PLA	STIC BAG	S!			
Additional Tests or Other Information (Additional Pesticide/Herbicide Information)																				
Symptoms:													Date/Time Received Laboratory Signat				Laboratory Signatu	re		

PLANT TISSUE SAMPLE INFORMATION SHEET

Submittal of information sheet to Waypoint Analytical, Inc. is acceptance of our terms and conditions. All prices are subject to change without notice. Additional fees may be charged to client if sample requires additional preparation procedures.