

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 "Additional Tests or Other Information" box below.									roor	n is r	eede	ed fo	r the	pesticide/he	rbicide testing r	equest, please use the	Dis			
Lab Number	Sample ID									Analy		Г.,	_		1 -			Crop/Growth Stage	Disease	
(Lab Use Only)	(6 chars. max)	PT2	N	Р	к	Mg	Ca	Na	S	Fe	AI	Mn	В	Cu	Zn	Nitrate-N	Chloride	(please use crop code)	•	
			-																	
Date/Time Collected	Sample ID Pesticide/Herbicide									de F	Residue					Signature of Sampler				
PT2 - Nitrogen, Phosphorus, Potassium, Magnesium, Calcium, Sodium, Sulfur, Iron, Aluminum, Manganese, Boron, Copper, Zinc																				
	Pesticide/Herbicide and Disease Analysis - Inquire with laboratory for any questions DO NOT SUBMIT PLANT TISSUE SAMPLES IN PLASTIC BAGS!																			
Additional Tests or Other Information (Additional Pesticide/Herbicide Information)																				
Symptoms:																Date/Tim	Date/Time Received Laboratory Signature			

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.