



## PLANT TISSUE INFORMATION SHEET

	CUSTOMER INFORMATION														GROWER INFORMATION					
Account # Grower ID Farm										ID	Field ID									
			e/herbicide analysis requested. If additional room										neede	d for	the	pesticide/he	rbicide testing r	equest, please use the	D <u>i</u>	
"Additional Tests or Othe Lab Number	Sample ID	Individual Analy								nalv	sis							Crop/Growth Stage	Disease	
(Lab Use Only)	(6 chars. max)	PT2	N	Р	K	Mg		Na			_	Mn	В	Cu	Zn	Nitrate-N	Chloride	(please use crop code)	se	
Date/Time Collected	Sample ID	ID Pesticide/Herbicide Residue														Signature of Sampler				
PT2 - Nitrogen, Phos													umir	num,	, Ma	nganese, I	Boron, Coppe	er, 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)																				
0																				
Symptoms:												Date/Time Received Laboratory Sign				Laboratory Signatu	re			
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## PLANT TISSUE SAMPLE INFORMATION SHEET