

AGVISE

LABORATORIES

Date Sampled ____ / ____ / ____

Date Received ____ / ____ / ____

GROWER

NAME _____

ADDRESS _____

_____ ZIP _____

FIRM SUBMITTING SAMPLES

ACCOUNT # _____

NAME _____

ADDRESS _____

_____ ZIP _____

Crop _____ Variety _____

Irrigated Dryland

Growth Stage (see other side) _____

CHECK PLANT PART SAMPLED:

Leaves _____ Petiole _____ Whole Plant _____

Normal _____ Abnormal _____

County _____ Field # _____

Township/Range _____ Field I.D. _____

Section _____ Acres _____

Quarter _____

OPTION CHOICES

(Check the Desired Option)

Complete Analysis Total Nitrogen, Phosphorus, Potassium, Calcium, Magnesium, Sodium, Zinc, Iron, Manganese, Copper, Sulfur, Boron (Chloride included on small grain) _____

Potato Petiole Option: Nitrate-Nitrogen, Phosphate-Phosphorus _____

Individual Nutrients: Total Nitrogen _____

Nitrate-Nitrogen _____

Phosphate-Phosphorus _____

Chloride _____

Boron _____

Other Tests: _____