



Contact Name:  
 Address:  
 City:  
 Postal Code:  
 Phone Number:  
 Email Address:  
 Date Submitted:

	Please Accurately Enter Sample Information			Please Check One				
	Sample Identification	Sample Description	Type of Crop	Plant Sap Testing	Water Nutrient Testing	Soil Testing	Fertilizer Testing	Humic/Fulvic Product Testing
1								
2								
3								
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**Address to ship to: Bay #3, 7895-49Ave Red Deer, AB T4P 2B4**