

# American Agricultural Laboratory, Inc.

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## Seed Sample Submittal Form

<b>Account Number, Name &amp; Address</b>		Bill To	
		Extra Copies To	
		e-Mail (PDF) Copies To	
		e-Mail Address	
		FAX To	
		FAX No.	
Growers Name	Sample Identification	Type of Seed	Lab Tests Requested
<b>LAB TESTS</b>		<b>Request Seed Sample Supplies</b>	<b>LAB USE ONLY</b>
Germination 1. Warm (5 days) 2. Cold (10 days) 3. Wheat (10 days)	Oil Crops 7. Moisture & Volatile Matter 8. Crude Protein 9. Oil 10. Foreign Matter	Quantity      Item _____ Seed Sample Submittal Forms _____ Zip Lock Sample Bag _____ Large Shipping Boxes _____ Medium Shipping Boxes _____ Small Shipping Boxes _____ ARS / UPS Labels _____ MRL / USPS Labels _____ Pre-addressed Labels	_____ ARS _____ MRL _____ None
Miscellaneous 4. Seed Count 5. Test Weight 6. Moisture			

PLEASE SUBMIT WHITE COPY WITH SAMPLES AND RETAIN PINK COPY FOR YOUR FILES