

CRANBERRY PLANT TISSUE SUBMISSION



Date Sampled: _____ No. of Samples: _____

Name _____ Account # _____

Address _____ County _____

City _____ State _____ ZIP _____

Account # _____

Email _____ Phone # _____

(If email address is provided, report will be sent in a PDF format to you.)

OFFICE USE ONLY	County Code _____
Laboratory Sample # _____	Date Received _____

ROUTINE ANALYSIS	Nitrogen, Phosphorus, Potassium, Calcium, Magnesium, Sulfur, Zinc, Manganese, Boron, Copper, Iron, Aluminum, Sodium.
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BOG IDENTIFICATION	VARIETY	BOG AGE	STAGE OF GROWTH	PLANT APPEARANCE
<i>Example Lower Field</i>		1=New Planting 2= 2-4 Years 3= 5+ Years	1=Pre-Bloom, 2=Bloom, 3=Fructing	Normal Vs. Abnormal

CUSTOMER COMMENTS

LABORATORY COMMENTS