Phone: (509) 836-2020
445 Barnard Blvd.
Sunnyside, WA 98944
Email: ahlabs@aghealthabs.com

Billing Info:

Client Name: _____
Phone:_____
Report By: Fax:____ Email:____ Mail:_____
Address: _____
Fax:_____ Email:_____

Export Hay Submission Form

Make checks payable to Ag Heath Labs: Mail submission form, samples, and payment to:

Ag Health Labs 445 Barnard Blvd. Sunnyside WA 98944

Lab Use Only Accession #	Feed Type	GMO (Round Up Ready)	Verticillium Wilt (Albo Atrum)	Aflatoxin	Nitrate	Other

Account Type: ____Visa_____MasterCard____ AMEX

Cardholder Name _____
Account Number _____
Experation Date _____ Billing Zip Code _____

Signuture: _____