



Lab Use Only

Rcvd Date: _____

Feed Submission Form

Billing Info

Bill To: _____ Phone: _____

Address: _____

Report by: Fax ___ Email ___ Mail ___ Phone _____

Fax: _____

Email: _____

Additional Report or Copy to:

Contact: _____ Phone: _____

Address: _____

Report by: Fax ___ Email ___ Mail ___ Phone _____

Fax: _____

Email: _____

Feed Sample Information

Lab Use Only	Accession #	Date Sampled	Feed Type	Description	Wet Chemistry Packages							NIR Packages			Lab Use Only		
					Feed Panel (9025)	Mineral Panel (9030)	Dry Cow Mineral (Mineral Panel + S, Cl) (9045)	Lignin (9045)	Starch (9051)	Dry Matter (9050)	Composite : _____	Other: _____	NIR Basic (9010)	NIR Basic + Wet Chem CP, ADF, NDF (9011)	NIR Plus (9012)	Other: _____	Shipping Fee (9099)

Account Type: ___ Visa ___ Mastercard ___ AMEX

Cardholder Name _____

Account Number _____

Expiration Date _____ Billing Zip Code _____

CVV2 (3 digit code on back of VISA/MC, 4 digit code on front of AMEX) _____

Signature: _____