SOIL SUBMISSION FORM

DATE MAILED:_______ COUNTY CODE:_______ ROUTINE or SPECIAL (list tests): __________

PHONE: __________________________

EMAIL: __________________________ (for returning soil report)

<table>
<thead>
<tr>
<th>NAME</th>
<th>ADDRESS (required)</th>
<th>Sample ID</th>
<th>Crop Codes (up to 5)</th>
<th>Lab Number</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Last</td>
<td>Street, City, Zip Code</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1.</td>
<td>Doe, John</td>
<td>3657 Rocky Rd, Atlanta 30303</td>
<td>Lawn</td>
<td>CLM, 087, 086</td>
</tr>
<tr>
<td>2.</td>
<td>Smith, Mae</td>
<td>1254 Peach Dr. Atlanta 30078</td>
<td>1</td>
<td>112, 098, 105, 101</td>
</tr>
</tbody>
</table>

INSTRUCTIONS:
If samples are not paid for through an Extension office, payment must be included.
Include only 12 samples per form, 1 sample per line. Info on sample bag should match info on form.
Crop and County codes must be used.
Samples for Special analyses must be listed on a separate form.
All samples listed on sheet should be enclosed in same box.
Enclose forms inside envelope and place inside box. Soils must be dry.

LAB USE ONLY
SET ID: __________
Login Date: __________________________

CASH  CREDIT  CHECK #

RECEIPT # __________
TECHNICIAN __________