



ANALYSIS REQUEST FORM

Feed Laboratory
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New Ulm MN 56073

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Minnesota Valley Testing Labs
1126 N Front St.
Building #1
New Ulm MN 56073

Company Name and address

Billing address if different form left.

Mailing Label-Clip and paste to package.

Reporting Format

US Mail

Fax

E-mail

Contact Person:

Additional Comments:

Phone Number:

Fax Number:

Project Name:

P.O. #

E-mail address:

Date Sent:

Date Rec'd

SAMPLE DESCRIPTION	Your Reference ID	ANALYZE FOR:	ESTIMATED LEVELS AND UNITS	lab use only
				Lab#