

## Vendor Sample Submission Form

**Complete After Approval and Submit with Samples\***

Company Name \_\_\_\_\_ Authorization Number: \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_

State \_\_\_\_\_ Zip \_\_\_\_\_

Email Address \_\_\_\_\_ Sampling Date \_\_\_\_\_

Sample #	Location in Garden	Name of Cultivar	ADS Class Number	Foliage: Exc - E Quest - ?
1				
2				
3				
4				
5				
6				
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25				
26				
27				
28				

\*See Instructions. Send form to Professor Pappu with samples **and** to [baronminer@aol.com](mailto:baronminer@aol.com)