



Testing Order Form

Client Information	Billing Information
Name	
Company	
Address	
Phone	
Email	

**** Please include this form in your sample shipment. ****

Your Sample ID	Plant Type	Sample Type		Additional notes		
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						
(If no payment is enclosed, we will invoice you at the indicated email address above.)					TOTAL (in \$ USD)	

V5-2022

Mail samples to: 635 SW Western Blvd. Corvallis, OR 97333

Contact us with any questions at +1 (541) 257-2612 or info@earthfort.com