

Open Sample Submission Form

Submit with Samples*

Company or Individual Submitter _____

Address _____ City _____

State _____ Zip _____

Email Address _____ Sampling Date _____

Sample #	Location in Garden	Name of Cultivar	Foliage Excellent: E Questionable: ?
1			
2			
3			
4			
5			
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30			

*See Instructions. Send form to Professor Pappu with samples and to the ADS at baronminer@aol.com