

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	Foliage: Excellent - E Questionable - ?
1			
2			
3			
4			
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28			

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