



Foundation

Analytical Laboratory

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Report and Bill To:

Name: _____

Date Submitted: _____

Address: _____

Submitted by: _____

City, State: _____

Email: _____

Zip: _____

Phone: _____

Manure Submittal Form

Lab ID Number (lab use only)	Sample ID	Date Sampled	Manure Type	Testing Requested	Other Analysis

Manure Type Codes (Enter numeric code above)	
Code	Description
1	Beef
2	Dairy
3	Poultry
4	Swine

Test Package Codes (Enter as many numeric codes as desired above)	
Code	Description
1	Total N, P, K
2	Ammonium N, Organic N
3	Ca, Cu, Fe, Mg, Mn, Na, S, Zn
4	Dry Matter
5	Ash
6	pH