

LEAF & FOLIAR ANALYSIS

SAMPLE SUBMISSION FORM



Crop Nutrition
 Laboratory Services
 Healthy, Profitable Farming

COMPANY NAME: _____

POSTAL ADDRESS (for Invoice): _____

FARM NAME (one only per form): _____

CONTACT NAME (to receive reports): _____

MOBILE: _____

EMAIL FOR RESULTS: _____

FIELD / BLOCK NAME	Analysis Names (from Column B on page 2)	Crop	IMPORTANT!	IMPORTANT!
			Crop Stage	Sampled Part
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				

SAMPLES RECEIVED BY (FOR LAB USE ONLY): _____ DATE: _____

AVAILABLE LEAF & FOLIAR ANALYSIS

A	B	C	D
Code	Analysis name	Details	Days
CNPA022	Complete Leaf Analysis	N, P, K, Ca, Mg, Fe, Zn, Mn, Cu, B	7
CNPA010	Nitrogen Analysis	% N	7

Address Details: P.O.Box 66437, Nairobi, Kenya

Contact Details: (Wireless) + 254 (20) 2044735 / 3561192
 (Mobiles) 0733 839933 and 0720 639933
 Info Email: healthy_soils@croppnuts.com



Physical Address for Sample drop off: Cooper Centre, Kaptagat Road, Off Kangemi Flyover, Waiyaki Way, Nairobi, Kenya.