

## Screening Waterhemp for Herbicide Resistance Sample Submission Form

\$50 fee, Glyphosate and PPO inhibitor testing

### Contact Information

Submitted by \_\_\_\_\_ Grower / Company \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

### Field Location (please use a separate form for each field)

State \_\_\_\_\_ (required)

County \_\_\_\_\_ (required)

Township \_\_\_\_\_ (preferred but not required)

GPS coordinates \_\_\_\_\_ (preferred but not required)

Field Name \_\_\_\_\_ (include if submitting samples from multiple fields)

Number of plants sampled \_\_\_\_\_ (5 plants per field is recommended)

*Remove the top two inches from each plant (containing young, newly emerged, healthy leaves) and seal it inside a small plastic zipper bag. Use a separate bag for each plant. Please do **NOT** include a wet paper towel in the bags.*

*Overnight or expedited shipping is recommended. Please do **NOT** ship on Friday or Saturday.*

**Additional Information** (please include herbicide use history, herbicides and rates applied this season, comments on observed weed control, and any other relevant information)

*Information and data may be shared with Dr. P. Tranel at the University of Illinois to map weed resistance across the state*

### Lab Use Only

Plant Clinic # \_\_\_\_\_

Number of plants \_\_\_\_\_

Date Received \_\_\_\_\_

Date Paid \_\_\_\_\_

Subsample #'s \_\_\_\_\_

Check Number \_\_\_\_\_