Whole Grain Protein Analysis Sample Submission Form

Office: 406/994-5377 Cereal Quality Laboratory Attn. Deanna Nash Lab: 406/994-2640 P.O. Box 173150 Fax: 406/994-7600 125 Plant BioSciences Bldg. (PBB), MSU e-mail: deanna@montana.edu Bozeman, MT 59717-3150 • Please submit one **Sample Submission Form** with each experiment to be analyzed. Research Center: Phone: Fax: Contact: E-mail: Address: Account to be charged: Grain Type (*circle one*): Winter Wheat Spring Wheat Durum Barley Oats Triticale Other (please specify): _____ Description: Experiment No. Number of Samples: Ending Sample Number: Beginning Sample No: Missing Sample Numbers: PLEASE CONFIRM THE FOLLOWING: Run protein outliers on LECO (reference method)? Yes No SAVE Samples? Yes No Report data via (circle one) FAX E-mail Mail (USPS) Date by which results **must** be received (MM/DD/YY): Plot No. – Entry No. will be used as the sample number unless otherwise specified. **Special instructions or comments:**

LAB USE ONLY:		
Date Received:		Date Data Sent:
Front Loaded:	WAS#	
Date Invoiced:		Invoice Number:

Samples to be	analyzed for protein content by Cereal Quality Lab Sample Submission Form Enclosed		
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