



## SOIL SUBMITTAL FORM GUIDE

Utilizing our myLab Portal at [mylab.midwestlabs.com](http://mylab.midwestlabs.com), you can electronically create your submittal form to ensure each sample is tested for the correct analysis and paired to your account for timely report delivery and invoicing.

If you are unable to access the myLab Portal, you can also utilize the printable PDFs to fill out your submittal forms available at [midwestlabs.com/resources/submittal-forms](http://midwestlabs.com/resources/submittal-forms).

### BE SURE TO INCLUDE THE FOLLOWING INFORMATION WITH ALL SAMPLES YOU SUBMIT:


- 1 Account Number and Contact Information
- 2 Sample ID matching the ID you wrote on your sample bags
- 3 Your desired soil test packages
- 4 Date of submission and total number of samples.



When you are ready to box your samples, a submittal form must be printed and included in the box with the samples before shipping. If you have multiple boxes for the same sample order, number the outside of the boxes. For example, number them "1 of 2", "2 of 2", etc. Then place all the paperwork for that order, either in the first box or the last box containing the samples. This extra step allows our receiving team to ensure all boxes have been received before they begin the sample layout.

*Please note, if your samples are growth medias or potting soils, contact us so we can go over the growth media options.*

\*ship samples to this address\*



13611 B STREET, OMAHA, NE 68144  
 402-334-7770 | CONTACTUS@MIDWESTLABS.COM

### SOIL SAMPLE SUBMITTAL FORM

Account Number: **123456**

Purchase Order: \_\_\_\_\_

First Form (50¢ Per Sample) ☐

Automatic Fax ☐ Automatic Email ☐

**COPY TO**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/State: \_\_\_\_\_

Email: \_\_\_\_\_

**REPORT & BILL TO**

Name: **John Doe**

Address: **1234 Appletree Lane**

City/State: **Omaha, NE** Zip: **68123**

Phone: **402-321-1234** Fax: \_\_\_\_\_

Email: **jdoe@gmail.com**

**IDENTIFICATION**

**Doe Fields Soil Samples**

State of Origin: \_\_\_\_\_ Regulated Y/N: \_\_\_\_\_

**IF FERTILITY RECOMMENDATIONS ARE REQUIRED, COMPLETE THIS SECTION. Recommendations charge includes three crops or yield levels.**

Crops to Be Grown	Yield Goal	Previous Crop	Surface Sample Depth (Inches)
corn	150	soybean	0 to 6

Remarks: \_\_\_\_\_

SAMPLE ID 10 Characters Max	SOIL TEST PACKAGES										SOIL HEALTH		NUTRIENT ANALYSIS	INDIVIDUAL TESTS													
	S1A	S1B	S1C	S2	S2N	S3	S4	S5	S6	Lawn	Gardens	S1B+		S1C+	S	P	Mn	Fe	Cu	B	NO3-N	TK	PH4-N	CI	AL	H2O	
(Surface) <b>Field 1</b>	X																										
Check only if subsols are submitted for N03-N only      Subsoil One: Depth _____ to _____      Subsoil Two: Depth _____ to _____																											
(Surface) <b>Field 2</b>	X																										
Check only if subsols are submitted for N03-N only      Subsoil One: Depth _____ to _____      Subsoil Two: Depth _____ to _____																											
(Surface) <b>Field 3</b>	X																										
Check only if subsols are submitted for N03-N only      Subsoil One: Depth _____ to _____      Subsoil Two: Depth _____ to _____																											
Check only if subsols are submitted for N03-N only      Subsoil One: Depth _____ to _____      Subsoil Two: Depth _____ to _____																											

Remarks: **\*Any additional comments can be added here\***

SUBMIT YOUR SAMPLE PAPERWORK FASTER AT  
**MYLAB.MIDWESTLABS.COM**

ORDER SUPPLIES | CREATE SHIPPING LABELS | VIEW RESULTS

# S1B = Soil Health Basic Package: \$55  
# S1C = Soil Health Complete Package: \$65

For nematodes sampling, please use the nematode sample submittal form.

For fees and sampling instructions, visit the agriculture link on our website at [www.midwestlabs.com](http://www.midwestlabs.com)

Signature of Sampler: **John Doe**      Date Shipped: **6/21/2023**

Total Samples Submitted: **3**      Page: **1** of **1**

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