



Illinois Extension

UNIVERSITY OF ILLINOIS URBANA-CHAMPAIGN

S-417 Turner Hall • 1102 S. Goodwin • Urbana, IL 61801 • extension.illinois.edu/plantclinic • (217) 333-0519 • plantclinic@illinois.edu

Nematology Submission Form

OFFICE USE ONLY
Sample Set ID _____

Sample Submitter _____

Date Sample Collected _____

County/State of Origin _____

Date Sample Received _____

Send Report to:

Name _____

Company _____

Address _____

Phone _____

Email _____

Send Invoice to:

Name _____

Company _____

Address _____

Phone _____

Email _____

Service Requested

- SCN Egg Count (\$25) Vermiform Nematode ID & Count (\$45) SCN Type Test (\$60)
- Corn Nematode ID & Count (\$45) Pine, Foliar, or Stem Nematode ID (\$25) Hg Type Test (\$120)
- Other _____ *Please call before shipping samples to arrange for services not listed.*

Please call ahead if you are sending more than twenty samples at a time.

Your Sample # or Name	Plant Clinic Sample ID #	Soil Type	Present Crop	Previous Crop	Crop 2 Years Ago	Next Crop