**REQUEST FORM FOR**

RFA#:

Date:

**LABORATORY ANALYSIS**

Client Name: [ ]  Feeds [ ]  Soil [ ]  Others

Address:

Contact No.:

E-mail:

Contact Person & Number:

|  |  |
| --- | --- |
| **No.** | **Sample Name** |
|  |  |

**Analysis:**

[ ]  Cation Exchange Capacity

[ ]  Organic Matter

[ ]  pH

[ ]  Chloride

[ ]  Sodium

[ ]  Zinc

[ ]  Zearalenone

[ ]  Others:

[ ]  Phosphorous

[ ]  Calcium

[ ]  Aflatoxin

[ ]  Starch

[ ]  Sugar

[ ]  Lactose

[ ]  Free Fatty Acid

[ ]  Peroxide Value

[ ]  Moisture

[ ]  Ash

[ ]  Ash Insoluble HCI

[ ]  Crude Protein

[ ]  Pepsin Digestibility

[ ]  Crude Fiber

[ ]  Crude Fat

[ ]  Phosphorous Soluble in Citric Acid

|  |  |
| --- | --- |
| **No.** | **Sample Name** |
|  |  |

**Analysis:**

[ ]  Cation Exchange Capacity

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[x]  Moisture

[ ]  Ash

[ ]  Ash Insoluble HCI

[ ]  Crude Protein

[ ]  Pepsin Digestibility

[ ]  Crude Fiber

[ ]  Crude Fat

[ ]  Phosphorous Soluble in Citric Acid

Client Signature over Printed Name Receiving Officer