GODINITTING GEED GET	TIOE CAMILLEO			
SEED CHARGES				
Purity Exam for one cultivar		\$24.00		
Purity Exam for more than one cultivar		\$36.00		
Purity Exam for seed samples with less than 90% seed		\$20.00 per hour		
Purity Exam for highly chaffy seed		\$20.00 per hour		
NOTE: Uncleaned seed will be charg	ed \$20.00 per hour for Purity Exam			
Noxious/Prohibited Weed Exam		\$	\$24.00	
Germination per cultivar (except highly chaffy seed)		\$24.00		
Germination - highly chaffy seed		\$	\$28.00	
Endophyte from seed		\$40.00		
Tetrazolium (TZ) Test		\$50.00		
Complete Test (includes Purity, Noxious Exam and Germination)			72.00	
SAMPLE SIZE NEEDED				
Large seed such as corn, soybean, wheat, etc.		~	~ Quart	
Highly chaffy seeds such as bromegrass, switchgrass, canarygrass, bluestem		~ Quart		
Small seed such as grass seed, legumes (clover), etc		~	~ Pint	
Vegetable seeds		2	00 seeds minimum	
Complimentary, cost-free seed analysis for Missouri farmers and individuals submitting samples from June 1 thru August 31, and November 1 thru January 15 based on postmark. The seed can not be intended for resale; therefore, not subject to the labeling requirements of the law.				
MAIL SAMPLES TO	DELIVER SAMPLES TO			
Missouri Department of Agriculture State Seed Control Laboratory PO Box 630 Jefferson City, MO 65102	Missouri Department of Agriculture State Seed Control Laboratory 115 Constitution Drive Jefferson City, MO 65109	Missouri Department of Agriculture State Seed Control Laboratory 115 Constitution Drive		
Contact Missouri State Seed Control Laboratory: 573-751-4340 (between 7am to 3:30pm Central Time)				
Additional forms can be obtained at http://ww	vw.agriculture.mo.gov			
PLEASE FILL THE BOTTOM PORTION AND SUBMIT WITH SAMPLE				
NAME OF THE SUBMITTING INDIVIDUAL (PLEASE PRINT)		USA PLANTS	SID# (IF AVAILABLE)	
ADDRESS	CITY	STATE	ZIP CODE	
TELEPHONE NUMBER EMAIL ADDRESS				
KIND OF SEED	LOT NUMBER	NUMBER YEAR THE SEED WAS HAF		
ANALYSIS REQUESTED (CHECK THE TEST(S) TO BE PERFORMED)				
☐ GERMINATION ☐ PURITY EXAM ☐ NOXIOUS/PROHIBITED WEED ☐ OTHER (SPECIFY)				
LABORATORY USE ONLY				
DATE SAMPLE RECEIVED	SAMPLE LAB NUMBER	SAMPLE BILLED		