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Sample Submission Form

Sample Submitted By:

Name: _____
 Company: _____
 Address: _____
 City: _____
 State: _____ Zip: _____
 Phone: _____ Fax: _____
 *e-mail: _____

Send Invoices To:

Name: _____
 Address: _____
 City: _____ State: _____ Zip: _____
 Contact: _____
 Phone: _____
 Purchase Order #: _____

Send Copy To:

Company: _____
 Consultant: _____
 Fax: _____
 Phone: _____

**Please include your e-mail address, we will confirm receipt of your sample submission by e-mail.*

Analytical Results

I would like to get my sample results by:

- Fax
- Mail
- Internet (see details at right)

To get your results online:

Go to www.mmilabs.com
 Click on Analysis Results
 Enter your Username and Password
 Click on the date of results desired

If you choose to get results online:

1. Give your Username (phone number, with area code, no spaces)
2. Give your Password (company or contact name)

Sample Type:
 Water, Soil Media, Tissue
 Fertilizer or Hydroponic

Description:
 Include a description for your own identification purposes
 (for plant tissue, include Genus/Species)

Comments:
 Include location, description of problem, observations
 you may feel are relevant to the problem, etc.

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Remember to keep one copy of this form for your records, and return one copy to MMI

MMI Tracking