



Soil Foodweb™ Oregon, LLC
 1750 SW 3rd St Suite K
 Corvallis, Oregon 97333-1796
Tel (541) 752-5066 Fax (541) 752-5142
 info@oregonfoodweb.com

Foodweb Biology
 combined form for all sample types
 (01 November 2007 revision)
Report will be sent by email or fax.

Send 2 cups (250 g / 10 oz / 300 mL) material per sample, by **Next Day Air**. For detailed instructions call us or visit www.oregonfoodweb.com

Mailing Address <i>(Reports will be sent here.)</i>		Billing Address <i>(if different from mailing)</i>	
Contact Person		Contact Person	
Organization		Organization	
Address		Address	
City, State		City, State	
Zip, Country		Zip, Country	
Phone		Phone	
Fax		Fax	
email		email	

Sample ID				
Sample Type (Soil or Other)				
Intended Crop				
Date Taken				
Tests Ordered				
Notes				

Packages (same prices apply to all sample types unless otherwise noted)

Qty	Testing Package	includes the following assays	price per sample	subtotal
_____	Full Foodweb	TB-TF-AB-AF-Prot-Nem (recommended first time test)	\$195.00	_____
_____	Quality Check Upgrade	Full Foodweb plus E. coli (mainly for amendments)	\$220.00	_____
_____	Root Check Upgrade (Soil only)	Full Foodweb plus Mycorrhizal Colonization	\$240.00	_____
NOTE: Any soil sample without at least 25cm (10in) active root tip material will automatically switch back to the Full Foodweb package.				
_____	Basic Foodweb	TB-TF-AB-AF (fastest turnaround time for liquid samples)	\$ 90.00	_____
_____	Leaf Surface Foodweb	(includes before and after; assesses foliar applications)	\$ 30.00	_____

Qty	Individual Assays	price	subtotal	Qty	Individual Assays	price	subtotal
_____	TB: Total Bacteria	\$ 24.00	_____	_____	MC: Percent Colonization	\$ 53.00	_____
_____	TF: Total Fungi	\$ 24.00	_____	_____	of Roots by Mycorrhizal Fungi		_____
_____	AB: Active Bacteria	\$ 24.00	_____	_____	Qualitative Assay	\$ 35.00	_____
_____	AF: Active Fungi	\$ 24.00	_____	_____	E. coli	\$ 35.00	_____
_____	Prot: Protozoa	\$ 53.00	_____	_____	pH	\$ 5.00	_____
_____	Nem: Nematodes	\$ 73.00	_____	_____	Electrical Conductivity	\$ 5.00	_____

Payment Information: Check Enclosed Purchase Order # _____
 American Express Mastercard VISA

Card# _____ - _____ - _____ - _____ **Expiration** ____ / ____
Name on Card: _____

PLEASE NOTE: all credit card transactions are processed through our partner company, **Earth Fortification Supplies**

Total of all the above: \$ _____
If payment is included (check or CC#): Subtract 10% of Total: \$(_____)
Amount due: \$ _____