GROWER NAME (please print)

# NEMATODE PROBLEM-DIAGNOSIS INFORMATION *(continuation form AD-5+)*

PAGE NUMBER

**FIELD HISTORY**

| Serial # | LAB NUMBER (leave blank) | SAMPLE ID | CURRENT CROP (include variety, if known) | CROP LAST YEAR (include variety, if known) | NEMATICIDE APPLIED LAST YEAR | SOIL TYPE | PLANT APPEARANCE (check any that apply) | | | | SYMPTOM DISTRIBUTION | |
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| | | | | | | | Normal | Stunted | Yellow | Dead | Field | Patches |
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*Thank you for using agronomic services to manage nutrients and safeguard environmental quality. — Steve Troxler, Commissioner of Agriculture*

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