



North Carolina Department Of Agriculture And Consumer Services

(Office Use Only)

Sample No. \_\_\_\_\_
Check \_\_\_\_\_
Cash \_\_\_\_\_
Escrow Acct # \_\_\_\_\_
Forage Code \_\_\_\_\_

June 15, 2017

Steve Troxler
Commissioner

Food & Drug Protection Division
Animal Feed Program

Anita MacMullan
Director

NORTH CAROLINA FARM FEED TESTING SERVICE
NO COMMERCIAL SAMPLES ANALYZED

Please send a gallon size portion for hay/grasses. For feed/grain sample a quart size portion is needed.

- Include check or money order made payable to NCDA&CS.
If via US Postal Service, mail to: Forage Testing, NCDA&CS, 1070 Mail Service Center, Raleigh, NC 27699-1070
If via FedEx or UPS, mail to: Forage Testing, NCDA&CS, 4000 Reedy Creek Road, Raleigh, NC 27607

I. SENDER

Farmer/Producer \_\_\_\_\_
Address \_\_\_\_\_
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_
County \_\_\_\_\_ Email Address: \_\_\_\_\_
Phone ( ) \_\_\_\_\_ Fax ( ) \_\_\_\_\_

Account Contact Name \_\_\_\_\_ Escrow Account Number \_\_\_\_\_

How do you prefer your results: Hard Copy Email Fax Extension assistance requested

A COPY WILL BE SENT TO THE PERSON LISTED BELOW:

Name \_\_\_\_\_
Address \_\_\_\_\_
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_
County \_\_\_\_\_ Email Address: \_\_\_\_\_
Phone ( ) \_\_\_\_\_ Fax ( ) \_\_\_\_\_

II. ANALYSIS

Single Testing Available for No Charge: Nitrates Only (No Charge) Aflatoxin Only (No Charge)

Complete Analysis (\$10.00)
Includes: Moisture, Protein, Fiber, Minerals (Calcium, Phosphorus, Sulfur, Magnesium, Sodium, Potassium, Copper, Iron, Manganese, Zinc)

The following test can be added to the Complete Analysis if Needed.

NDF (Neutral Detergent Fiber) Fat
Nitrates Aflatoxin

(over please)

**III. SAMPLE IDENTIFICATION**

(Please include a description that makes it identifiable to you)

Date Cut:

Date Baled

**IV. FEEDING INFORMATION (Please indicate species and status)**

SPECIES:  Dairy  Beef  Swine  Sheep  Goat  Horse  Poultry  Other  
STATUS:  Growth  Lactation  Maintenance  Gestation  Finishing  Work  Egg Production  Other

**FORAGE TYPE (Check One)**

- Fresh Forage
- Hay
- Silage

**STAGE OF MATURITY (Check One)**

- |                                       |   |
|---------------------------------------|---|
| <u>Legumes</u>                        | <u>Grasses</u>                                    |
| <input type="checkbox"/> Bud          | <input type="checkbox"/> Vegetative, No Heads     |
| <input type="checkbox"/> Early Bloom  | <input type="checkbox"/> Milk to Soft Dough       |
| <input type="checkbox"/> Late Bloom   | <input type="checkbox"/> Heads Emerging to Headed |
| <input type="checkbox"/> Seeds Formed | <input type="checkbox"/> Hard Dough or Dent       |

**\*\*\* You may select only One sample type from the list below (A thru F). \*\*\***

**A FORAGES**

- |   |   |  |
|---|---|--|
| <b>Legumes</b><br>101 <input type="checkbox"/> Alfalfa<br>103 <input type="checkbox"/> Clover<br>105 <input type="checkbox"/> Lespedezia, annual<br>107 <input type="checkbox"/> Lespedezia, sercia<br>109 <input type="checkbox"/> Peanut Forage<br>111 <input type="checkbox"/> Soybean Forage<br>113 <input type="checkbox"/> Vetch<br>115 <input type="checkbox"/> Other Legume | <b>Legume-Grass Mixtures</b><br>201 <input type="checkbox"/> Mixed Mostly Legume<br>203 <input type="checkbox"/> Mixed Mostly Grass<br><br><b>Corn Forages</b><br>401 <input type="checkbox"/> Corn, Whole Plant<br>403 <input type="checkbox"/> Corn, Fodder or Stover<br>405 <input type="checkbox"/> Corn Stalks | <b>Grasses</b><br>301 <input type="checkbox"/> Barley Forage<br>303 <input type="checkbox"/> Bermudagrass<br>305 <input type="checkbox"/> Fescue<br>307 <input type="checkbox"/> Millet Forage<br>309 <input type="checkbox"/> Oats Forage<br>311 <input type="checkbox"/> Orchardgrass<br>313 <input type="checkbox"/> Rye Forage<br>315 <input type="checkbox"/> Ryegrass<br><br>317 <input type="checkbox"/> Sorghum Forage<br>319 <input type="checkbox"/> Sorghum-Sudan<br>321 <input type="checkbox"/> Sudan Grass<br>323 <input type="checkbox"/> Triticale Forage<br>325 <input type="checkbox"/> Wheat Forage<br>399 <input type="checkbox"/> Other _____ |
|---|---|--|

**B GRAINS**

- |   |  |
|---|--|
| 501 <input type="checkbox"/> Barley                 | 515 <input type="checkbox"/> Rye             |
| 503 <input type="checkbox"/> Corn, grain or meal    | 517 <input type="checkbox"/> Sorghum (milo)  |
| 505 <input type="checkbox"/> Corn, grain & cob meal | 519 <input type="checkbox"/> Soybeans, whole |
| 507 <input type="checkbox"/> Corn, ear with shuck   | 521 <input type="checkbox"/> Triticale       |
| 509 <input type="checkbox"/> Cottonseed, whole      | 523 <input type="checkbox"/> Wheat           |
| 511 <input type="checkbox"/> Millet                 | 599 <input type="checkbox"/> Other           |
| 513 <input type="checkbox"/> Oats                   |  |

**C ROUGHAGES, BYPRODUCTS & INGREDIENTS**

- |   |   |
|---|---|
| 601 <input type="checkbox"/> Apple Pulp       | 617 <input type="checkbox"/> Potato Waste       |
| 603 <input type="checkbox"/> Beet Pulp        | 619 <input type="checkbox"/> Poultry Litter     |
| 605 <input type="checkbox"/> Citrus Pulp      | 621 <input type="checkbox"/> Rice Hulls         |
| 607 <input type="checkbox"/> Corn Bran        | 623 <input type="checkbox"/> Soybean Hulls      |
| 609 <input type="checkbox"/> Corn Cobs        | 625 <input type="checkbox"/> Straw, Small Grain |
| 611 <input type="checkbox"/> Cottonseed Hulls | 627 <input type="checkbox"/> Wheat Bran         |
| 613 <input type="checkbox"/> Oat Hulls        | 699 <input type="checkbox"/> Other              |
| 615 <input type="checkbox"/> Peanut Hulls     |   |

**D 700.  HOME MIXES**

(Mixture of Grains, Supplements or Ingredients containing no roughage)

<u>Ingredient</u>	<u>% of Mix</u>	<u>Pounds/Ton</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

**E 800.  TOTAL MIXED RATIONS**

(Mixtures of Concentrates, Forage and Roughages)

	<u>Ingredients</u>	<u>% of Mix</u>	<u>Pounds/Ton</u>
<b>Grains</b>	_____	_____	_____
	_____	_____	_____
<b>Roughage</b>	_____	_____	_____
	_____	_____	_____

**F 900.  OTHER (Provide a complete description)**

**ADDITIONAL TREATMENTS**

- |                                  |  |
|----------------------------------|--|
| <input type="checkbox"/> Urea    | <input type="checkbox"/> Added Drugs (Please List) |
| <input type="checkbox"/> Ammonia | <input type="checkbox"/> Other (Please List)       |