



## Foundation Plant Services, University of California

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# **FPS DNA IDENTIFICATION TESTING REQUEST FORM**

*Please complete all information on the form. Use additional pages if needed. New customers will receive an email with direction on how to submit a W9 Form. If applicable, the Company Name must match the name shown on your income tax return or W-9 Form.*

**\*\*Final results will be delayed if the Company Name does not match the name on the W9 or if the W9 is not submitted in a timely manner.**

Date of Request: \_\_\_\_\_

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Contact Person: \_\_\_\_\_

Company Name: \_\_\_\_\_

Phone #: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

FAX #: \_\_\_\_\_

City, State, ZIP: \_\_\_\_\_

Email: \_\_\_\_\_

Comments/Special Instructions:

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**Total # of sample(s) submitted: \_\_\_\_\_**

*(List sample names below. Names must match names on sample envelopes)*

**Crop Type: \_\_\_\_\_**  
*(almond, apple, apricot, cherry, grape, olive, peach, plum, pistachio, strawberry and walnut)*

1. \_\_\_\_\_

16. \_\_\_\_\_

2. \_\_\_\_\_

17. \_\_\_\_\_

3. \_\_\_\_\_

18. \_\_\_\_\_

4. \_\_\_\_\_

19. \_\_\_\_\_

5. \_\_\_\_\_

20. \_\_\_\_\_

6. \_\_\_\_\_

21. \_\_\_\_\_

7. \_\_\_\_\_

22. \_\_\_\_\_

8. \_\_\_\_\_

23. \_\_\_\_\_

9. \_\_\_\_\_

24. \_\_\_\_\_

10. \_\_\_\_\_

25. \_\_\_\_\_

11. \_\_\_\_\_

26. \_\_\_\_\_

12. \_\_\_\_\_

27. \_\_\_\_\_

13. \_\_\_\_\_

28. \_\_\_\_\_

14. \_\_\_\_\_

29. \_\_\_\_\_

15. \_\_\_\_\_

30. \_\_\_\_\_