REGAL Sample Submission Form

*all fields are mandatory unless designated 'optional' QF-96 **REGAL Laboratory** (For Lab Use Only) Laboratory WO# #310 - 280 Portage Close Sherwood Park, AB Received by: **T8H 2R6** Date received: **Submission Information Function** Submission ID (unique sample identifier) **EXPORT** Date sampled **Date of shipping to REGAL Laboratory Activity** Grains and Oilseeds Inspection **Sub-Activity Grain for Processing or Consumption Reason for Analysis** Weed Seeds Soil Insects **Sampling Location Information Sampling Company CGSP Approval #** Sampling Location Information (if different from above) **R.R.** or Street City **Province** Postal code (optional) Telephone # **Sampler Information Name of Sampler Sampler Signature** Date **Export Information Destination Country Exporter Name R.R.** or Street E-mail address Telephone# City **Province Postal Code Sample Information** Commodity (Scientific and/or common names) **Country of Origin** Railcar#, Container#, Lot# or Vessel Name Quantity for Export (mT) Date of Export (optional) Is this sample within the scope of REGAL testing (grain, not intended for propagation and not crushed or ground)? Yes No Was this shipment or sample treated or fumigated? Yes No If yes, provide details of the treatment or fumigant (*please include MSDS for any treated product including a gas free certificate if the product was fumigated) **Comments:**

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