
Idaho Food Quality Assurance Laboratory Sample Submission Form



IFQAL
1180 Washington St N
Twin Falls, ID 83301
(208-)732-5325

	Date:
--	--------------

Submitter Name:		
Agency:		
Mailing Address:		
City:	State:	Zip:
Telephone #:	Fax#:	
e-mail address:		

Sample Matrix:
Tests Requested:
Sample ID #: