



FOR LAB USE: Received: _____

Check #: _____

Sample# _____

Cornell University

Insect Diagnostic Laboratory (IDL) CCE Submission Form

CCE Agent: _____	Client: _____
CCE County: _____	Street address: _____
CCE Address: _____	Town, State, Zip: _____
Town, State, Zip: _____	Location (if collected elsewhere): _____
CCE E-mail address: _____	_____
Phone: (____) _____	County: _____ <i>Grower / Homeowner (circle)</i>

Reply to Client? If so, please provide their E-mail address: _____

Date Sample Collected: _____

Host (kind of plant, animal, food, etc.): _____

If found indoors: (house, office, etc.) room(s), floor(s): _____

If outdoors not associated with a plant: (foundation, deck, etc.): _____

Nature and extent of problem, and when it was first noticed: *(use back of page if needed)*

If the host is a plant: Age of plant(s): _____

When did the problem first occur?: _____ Is it getting worse?: _____

Distribution of problem (entire field, a few of the plants, dry or wet areas, single houseplant, etc.):

Mail sample, \$25 payment, and this form to:

Insect Diagnostic Laboratory
Cornell University
2144 Comstock Hall, Entomology
Ithaca, NY 14853-2601

For more information see: <http://idl.entomology.cornell.edu>

Before sending, have you:

- Enclosed the sample, in a crush-proof container with padding?

- **Enclosed a check or money order for \$25, payable to "Cornell University"?**

The check can be from the client, or from CCE, but must be included with the sample

FOR LAB USE ONLY:

Material received: *adult immature egg leaves branches roots whole plant other:* _____