

MOLECULAR PATHOGEN AND PEST DETECTION LAB

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(Lab Use Only)	

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FUNGUS ID BY DNA SEQUENCING FORM

Name	ECompany Name					
	LAST	FIRST				
Mailing Add	Iress			CITY S	TATE ZIP	
)		
EMAIL (repo	orts are emaile	rd – print clearly)				
		Name/Company				
Sample Collection Site: (if different from above)						
		'		County		
		Pilone	EIIIdII	county		
PAYMEI	NT METHO	os				
	lina Assaus	. .		Credit/Debit Card		
Billing Account:				- (coop OB code to poventine)		
Cas				Marketplace order #	:	
)II					
_	-	A sequencing			☐ \$40.00 in-state	
			n) will be sequenced to iden	- ·	South Carolina	
, , , , , , , , , , , , , , , , , , , ,		as <i>Fusarium</i> and <i>Pythium</i>), specific markers (such as flost samples will be identified to the species-level.		☐ \$50.00 out-of-state		
-	_	may be identified to the g		ied to the species level.		
Name of pla	ent host	-	Cultiv	ar/variety		
_						
	-					
Field ID/Ref	ield ID/Reference(Optional, up to 20 characters. Examples: Front Yard; Lot 1205497)					
County whe	ere collected_	collectedDate collected				
Comments:						
					<u>-</u>	
Sampling I				Sample type*:		
	eld		Forest	☐ Mushroom		
	arden		Orchard	☐ Slim mold	ultura (plata ar tuka)	
	andscape ant nursery] Park] Other	□ Microtungal c	ulture (plate or tube)	

* The Molecular Pathogen and Pest Detection Lab does not process any samples that are or may contain human and animal pathogenic fungi. Such samples will be discarded. For mushrooms and slim molds, only submit <u>FRESH</u>, not rotten samples. Enclose each sample in a <u>paper</u> bag. Do <u>NOT</u> add water or moist paper towels. Insufficient samples may prevent timely testing and reporting.