<table>
<thead>
<tr>
<th>Identification Functions</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Number:</strong></td>
<td><strong>Date Received:</strong></td>
</tr>
<tr>
<td><strong>Client Name:</strong></td>
<td><strong>Daytime Phone:</strong></td>
</tr>
<tr>
<td><strong>Mailing Address:</strong></td>
<td><strong>City:</strong></td>
</tr>
<tr>
<td><strong>E-Mail Address:</strong></td>
<td><strong>Sample Provided:</strong></td>
</tr>
</tbody>
</table>

Are you working with a landscape professional or commercial firm for indoor or outdoor spray service, landscape, nursery or soil analyst?  [ ] Yes  [ ] No

If you answered yes to any of these refer problem to Urban Horticulturist or Extension Specialist.

### INSECT

<table>
<thead>
<tr>
<th>This Insect is:</th>
<th>Date Collected:</th>
</tr>
</thead>
<tbody>
<tr>
<td>[ ] A nuisance</td>
<td></td>
</tr>
<tr>
<td>[ ] Causing Damage</td>
<td></td>
</tr>
<tr>
<td>[ ] A curiosity</td>
<td></td>
</tr>
</tbody>
</table>

Where was the insect found (plant, crawlspace, crop, kitchen, etc.)?

<table>
<thead>
<tr>
<th>Damage is:</th>
<th>Percentage of area/plants affected?</th>
</tr>
</thead>
<tbody>
<tr>
<td>[ ] Extreme</td>
<td></td>
</tr>
<tr>
<td>[ ] Serious</td>
<td></td>
</tr>
<tr>
<td>[ ] Moderate</td>
<td></td>
</tr>
<tr>
<td>[ ] Light</td>
<td></td>
</tr>
</tbody>
</table>

What plant?

<table>
<thead>
<tr>
<th>Plant Parts Attacked:</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>[ ] Leaves</td>
<td>[ ] Stems</td>
</tr>
<tr>
<td>[ ] Flowers</td>
<td>[ ] Buds</td>
</tr>
</tbody>
</table>

Client Observations/Comments:

Has control been attempted? Please indicate the product name, rate and date of application?

Identification Resources:

Identification/Recommendation:  

Diagnosed by:  

Results Delivered via: (circle)  

Phone  E-mail  In person

Handout provided? Yes or No  Describe:  

Adapted from C0495 insect Identification for WSU Chelan County Master Gardener Program Diagnosis clinic. Rev. 1/2017 JM
**IDENTIFICATION FUNCTIONS**

**Type of plant:**
- [ ] Evergreen:  
- [ ] Deciduous:  
- [ ] Weed  
- [ ] Ground cover  
- [ ] Tree  
- [ ] Houseplant  
- [ ] Vine  
- [ ] Shrub, bush, or hedge

**Where was the plant found?**
- [ ] Lawn  
- [ ] Pasture  
- [ ] Vegetable Garden  
- [ ] Flower Garden  
- [ ] Natural area  
- [ ] Raised Bed  
- [ ] Container  
- [ ] Driveway, drainage ditch, etc.  
- [ ] Other __________________________

Describe growth (tall, narrow, spreading, etc.). Photos may be included or e-mailed to chelanmastergardeners@gmail.com.

Describe Flowers (including color):

When do flowers appear?
- [ ] Spring  
- [ ] Summer  
- [ ] Fall  
- [ ] Winter

Describe fruit, berries, etc. (including size and color):

When does fruit appear?
- [ ] Spring  
- [ ] Summer  
- [ ] Fall  
- [ ] Winter

Is there anything else distinctive about the plant?

Client is concerned about plant toxicity.
- [ ] Yes, please explain: ____________________________________________  
- [ ] No

Identification Resources:

Identification/Recommendation/Handout: ________________________________

Diagnosed by: __________________________________________

Results Delivered via: (circle)
- [ ] Phone  
- [ ] E-mail  
- [ ] In person

Handout provided?  
- [ ] Yes  
- [ ] No  
Describe: ____________________________________________  
Code: ____________________

Adapted from C0495 Plant Identification for WSU Chelan County Master Gardener Program Diagnosis clinic. Rev. 1/2017 JM