

# Bovine Viral Diarrhea Virus Test Sample Submission Form



## Office Use Only

Log # \_\_\_\_\_

Amount Enclosed \$ \_\_\_\_\_

Notes: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

### Bill To:

Company Name: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_

Fax: \_\_\_\_\_

Email: \_\_\_\_\_

Payment Included \$ \_\_\_\_\_ (check or money order)

### Optional Information:

Veterinarian's Name: \_\_\_\_\_

Client's Name: \_\_\_\_\_

Herd ID: \_\_\_\_\_

### Send Report by:

(Preferred method to receive report, check box and include info.)

Email: \_\_\_\_\_

Name & Phone: \_\_\_\_\_

Fax: \_\_\_\_\_

Mail (sent to address under Bill To :)

### Breed of Animal:

Beef \_\_\_\_\_

Dairy \_\_\_\_\_

### Samples:

Date Drawn: \_\_\_\_\_ Date Sent: \_\_\_\_\_

Number of Samples Submitted: \_\_\_\_\_

Tube #	Animal ID
1	
2	
3	
4	
5	
6	
7	
8	
9	
10	
11	
12	
13	
14	
15	

Tube #	Animal ID
16	
17	
18	
19	
20	
21	
22	
23	
24	
25	
26	
27	
28	
29	
30	

Tube #	Animal ID
31	
32	
33	
34	
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Tube #	Animal ID
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