Show Name: ________________________________
Show Account #: __________________________
Submitter Name: ___________________________
Phone (____) _____________________________

*Please attach a list of animal ID numbers and animal species (Do Not Include Exhibitor Names)*

I certify that these samples were collected, packaged, and shipped in a manner as to maintain integrity, chain of custody, and avoid opportunities for contamination:

Submitter: ________________________________
(Print) (Sign) (Date)

All samples submitted to TVMDL for testing become the property of the agency and may be tested as part of state/federal surveillance programs, utilized for research purposes and/or development of new assays. TVMDL is unable to return samples to the client unless prior arrangements are made and approved by the agency Director or designee.

Lab Use Only

Date Received: _______________ Sample Condition: [ ] Frozen [ ] Chilled [ ] Ambient

Were Sample Seals Intact? [ ] Yes [ ] No

Describe any additional details: __________________________________________________________

________________________________________

Lab Personnel: ________________________________
(Print) (Sign) (Date)