General Submission Form

Vet Details	Farm Details
Vet:	Surname:
Practice:	Farm:
Address:	Address:
Postcode:	Postcode:
Tel:	Tel:
Fax:	Fax:
email:	email:

Details ie Tests Required/ History (If necessary Continue overleaf)

Temperature on Arrival:

Sample Details

Submission Number	Date of Receipt	Sample/Cow ID	Test	Carried out by/Date	Result
		Date Reported:		Initials:	

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