

Owner to complete		
Owner	Species	
Address	Age	
	Gender	
	Date collected	
	Production stage	
Email	Total number of samples	
Telephone	Date posted	

Owner to complete				
Pooled Test	Individual Test			
Test Required:				
WEC	Cocci			
Fluke	Lungworm			
Camelid WEC				

Lab to complete	
Date Received	
Date run	
Lab technician	
Vet	

Owner to complete	
Individual or Group IDS:	
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Comments:	



