



NORTHWEST LABS, LLC.
 150 BRIDON WAY
 JEROME, IDAHO 83338
 208-324-7511

Blood Pregnancy Test

Sample Submission Form

Invoice/Report Sent to:

Company: _____
 Address: _____

 Phone: _____
 Fax: _____
 Email: _____

Beef Breed _____ Dairy Breed _____

Payment Included \$ _____ Bill To: Vet _____ Owner _____

Report by: Fax Phone Email Mail

COWS MUST BE AT LEAST 29 DAYS POST-BREEDING AND AT LEAST 90 DAYS IN MILK FOR TEST TO BE VALID. GOATS MUST BE AT LEAST 35 DAYS POST-BREEDING AND AT LEAST 70 DAYS POST LAMBING/KIDDING.

Date Sent _____ Total # of Samples _____

Please label top of vial with animal number. Place in order to match the submittal form.

Tube #	Animal ID	Days Bred	DIM	Tube #	Animal ID	Days Bred	DIM
1				21			
2				22			
3				23			
4				24			
5				25			
6				26			
7				27			
8				28			
9				29			
10				30			
11				31			
12				32			
13				33			
14				34			
15				35			
16				36			
17				37			
18				38			
19				39			
20				40			

Tube #	Animal ID	Days Bred	DIM	Tube #	Animal ID	Days Bred	DIM
41				78			
42				79			
43				80			
44				81			
45				82			
46				83			
47				84			
48				85			
49				86			
50				87			
51				88			
52				89			
53				90			
54				91			
55				92			
56				93			
57				94			
58				95			
59				96			
60				97			
61				98			
62				99			
63				100			
64				101			
65				102			
66				103			
67				104			
68				105			
69				106			
70				107			
71				108			
72				109			
73				110			
74				111			
75				112			
76				113			
77				114			

