DIAGNOSTIC SAMPLE SUBMISSION FORM – ADDITIONAL SAMPLES

Sample ID		Animal ID		Sex	Age	Farm ID*	Sample type (and anatomical location)	
							Vorm KK-diag	n_add-01-20
								-
								-
								:
								-
								-
								:
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Sample(s) No		N of animals	Samp	le type	Test requested		Remarks, details	
								-
								1
		I			1			J
	BY THE LABORA							
Registration I	number (labora	tory ID):						
* if appropriate								

Veterinaar- ja Toidulaboratooriun Estonian Veterinary and Food Laboratory

INFORMATION ABOUT SAMPLES:

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