



PO Box 141 \* 8810 CR 215  
 Anderson, Texas 77830  
 979-533-0858 \* 936-825-5295  
 biopregcheck@gmail.com

Office use: \_\_\_\_\_ \$0.28 Per Tube  
 \_\_\_\_\_ \$0.42 Per Syringe

**PAYMENT OF \$2.75 PER SAMPLE NEEDED.  
 PLEASE INCLUDE PAYMENT WITH SAMPLES!**

### Cattle Sample Submission Form

Payment Included \$ \_\_\_\_\_ Check# \_\_\_\_\_

**Billing Information**

Company Name: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

**Send Report By:**

Email \_\_\_\_\_

Phone: \_\_\_\_\_

Mail \_\_\_\_\_

(sent to address under Billing info, plus \$0.50 for postage)

**Breeding Method:**

Bull

Artificial Insemination (AI)

Embryo Transfer

**Breed Of Animal:**

Beef

Dairy Type Of Breed: \_\_\_\_\_

# of Samples To Be Tested: \_\_\_\_\_

Date Blood Drawn: \_\_\_\_\_

Tube #	Animal ID	Days Bred	Cow (C) or Heifer (H)
1			
2			
3			
4			
5			
6			
7			
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11			
12			
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14			
15			
16			
17			
18			
19			
20			

Tube #	Animal ID	Days Bred	Cow (C) or Heifer (H)
21			
22			
23			
24			
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Tube #	Animal ID	Days Bred	Cow or Heifer
41			
42			
43			
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Tube #	Animal ID	Days Bred	Cow or Heifer
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116			

# TUBE LABELING INSTRUCTIONS

1. Label tubes consecutively: Ex: 1 through 10

Always put this number above the animal ID

2. Put animal ID on proper tube: Ex: 1422

Always put this number below tube #

Ex:



Tube # 1

Animal ID 1422

3. Copy these two numbers onto the  
“Sample Submission Form”

Note: A list of tube numbers, 1 through 40, is already  
in a column on the form.

Tube #	Animal ID	Days Bred	Cow or Heifer
117			
118			
119			
120			
121			
122			
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Tube #	Animal ID	Days Bred	Cow or Heifer
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Tube #	Animal ID	Days Bred	Cow or Heifer
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Tube #	Animal ID	Days Bred	Cow or Heifer
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Tube #	Animal ID	Days Bred	Cow or Heifer
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Tube #	Animal ID	Days Bred	Cow or Heifer
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