



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 \$6.50 PER SAMPLE NEEDED.
 PLEASE INCLUDE PAYMENT WITH SAMPLES!**

Goat & Sheep Sample Form

Payment Included \$ _____ Check# _____

Billing Information

Company Name: _____

Contact Name: _____

Address: _____

City: _____

State: _____ Zip Code: _____

Breeding Method:

- Buck
- Artificial Insemination (AI)
- Embryo Transfer

Breed Of Animal:

Type Of Breed: _____

of Samples To Be Tested: _____

Date Blood Drawn: _____

Send Report By:

Email _____

Phone: _____

Mail _____

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

Tube #	Animal ID	Days Bred	Goat (G) or Sheep (S)
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			
16			
17			
18			
19			
20			

Tube #	Animal ID	Days Bred	Goat (G) or Sheep (S)
21			
22			
23			
24			
25			
26			
27			
28			
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30			
31			
32			
33			
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35			
36			
37			
38			
39			
40			

Tube #	Animal ID	Days Bred	Goat (G) or Sheep (S)
41			
42			
43			
44			
45			
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51			
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Tube #	Animal ID	Days Bred	Goat (G) or Sheep (S)
79			
80			
81			
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89			
90			
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115			
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.