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Order Sheet for Sheep Genotyping

REQUESTED ANALYSIS:	<input type="checkbox"/> Scrapie	<input type="checkbox"/> Microphthalmia
	<input type="checkbox"/> Other	

Sample owner / Client:	Send a copy of results to:
Name: _____	_____
Street: _____	_____
Postal Code: _____	_____
Town: _____	_____
Country: _____	_____
Phone: _____	_____
Fax: _____	_____
Email: _____	_____
Customer ID.: _____	_____

Please complete the form and send it together with the samples to Agrobiogen GmbH, Genotyping Department

No.	Eartag No. Breed No.	Sample ID	Breed	sex	Date of Birth	Company / Owner / Client
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						

I hereby confirm, that the shipped samples come from the listed animals and are signed correctly:

Date, Place and Signature of Sample Supplier

Agrobiogen is analysing the three relevant codons (136, 154, 171). The test results are issued to owner/client in written form. Additionally, analysing results can be issued by email or fax. The results are available within 10 workdays. The signature is at the same time an agreement for the *terms and conditions* of Agrobiogen.