

Advanced Dairy Diagnostics & Consulting, LLC

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Pregnancy Test Submission Form

Sample must contain at least 2cc blood in red top tube. No need to send on ice UNLESS you are doing tests other than pregnancy testing. Samples must be received by Wednesday in order to have results back the same week. Please call our office with any questions or concerns.

Source Farm: _____

Address: _____

Date sampled: ___/___/___ Report to: E-mail _____

Fax _____ Phone _____

Total # of Samples _____ @ \$ 3.25 = \$ _____ testing fee

Please make checks out to: ADDC

Supplies: 3cc Red top blood tubes (100ct. box)	@ \$ 26.00 = \$ _____
5cc Red top blood tubes (100ct. box)	@ \$ 26.00 = \$ _____
Bleeding needles (100ct. box)	@ \$ 26.00 = \$ _____
Vacutainer sheath (1)	@ \$ 1.50 = \$ _____

Shipping \$10.00 = \$ _____ Total Enclosed \$ _____

*Please pay S&H **only if** we are shipping tubes, needles, or other supplies **to you***
(Clearly number each tube sequentially **PLUS** animal ID)

Tube #	Animal #/ID	Tube #	Animal #/ID
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	_____