



Sheep & Goat Sample Submission Form



MVA Lab
222 E Co Rd 173
Melrose, MN 56352
Phone: (320) 256-4252
mvalab@veterinaryassociates.com

Billing Information:

Name: _____
Address: _____
City: _____
State: _____ Zip Code: _____
Phone: _____
Fax: _____
Email: _____

Office Use Only
Log #: _____
Amount Enclosed \$: _____
Notes: _____

Payment Included \$ _____ (check or credit card)
MAKE CHECKS PAYABLE TO: MVA Lab
\$6.75 per sample

Send Report by:

(Preferred method to receive report; check box(es) and include info)

Email: _____
 Name & Phone: _____
 Fax: _____
 Mail (sent to address under Billing Information:)

Breeding Method:

Buck / Ram
 Artificial Insemination (AI)

Type of Animal:

Sheep
 Goat

Number of Samples Submitted: _____

Tube #	Animal ID	Days Bred
1		
2		
3		
4		
5		
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15		
16		

Tube #	Animal ID	Days Bred
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Tube #	Animal ID	Days Bred
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Tube #	Animal ID	Days Bred
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