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Submission Form KEF

für Faeces-, Bedding- and Feedingsamples

Veterinarian

Name
Address
ZIP/City
Country
Phone Fax
Email
VAT number (EU)

Owner/Client

Name
Address
ZIP/City
Country
Phone Fax
Email
VAT number (EU)

Report to	Report by	Invoice to	Invoice by
☐ Veterinarian	☐ Email	☐ Veterinarian	☐ Email
☐ Owner/Client	☐ Fax	☐ Owner/Client	☐ Mail (+ € 2,-)
	☐ Mail (+ € 2,-)		

Specimen

of samples Samping date

Sample type: ☐ Slurry ☐ Feed ☐ Bedding ☐ Faeces ☐ Other:

Species:

Date Signature

Tests

☐ Culture (quantitatively) ☐ Special requirements:

☐ Preservation of pathogen isolates

Clinical History

sample no.	Sample identification	miprolab INTERNAL

Prices according to the respective valid list of services, exclusive VAT, delivers on request
These services are subject to our general terms and conditions, which are available at www.miprolab.com