

**Genetic Background
Contamination Quality Control**

27 Microsatellite Markers (short panel)

Ship samples to:

4011 Discovery Drive
Columbia, MO 65201

www.idexxbioanalytics.com
email: idexxbioanalytics@idexx.com
Toll Free: 800-544-5205 Opt.1
Customer Service: 573-499-5700
Fax: 573-499-5701

SUBMITTER INFORMATION:

Name: _____

Institution / Firm: _____

Address: _____

City: _____ State: _____ Zip: _____

Country: _____

Phone Number: _____

Fax Number: _____

Email: _____

Quote # (if applicable): _____

Case report will be sent to the e-mail address provided above.

BILL TO:

Institution / Firm: _____

Attention: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone Number: _____

Fax Number: _____

Email: _____

PO Number: _____

Invoice Type: Emailed Mailed Faxed

Payment information is required in order to ensure prompt processing of samples.

USE A SEPARATE SUBMISSION FORM FOR EACH SPECIES

Shipping Date: _____ Total # of Samples: _____ Species: _____

Background strain description: _____

Is this a continuation of an ongoing Project? Yes No

If yes, provide previous IDEXX BioAnalytics case number: _____

	SAMPLE ID	STRAIN	SEX	OTHER _____	OTHER _____
1	_____	_____	_____	_____	_____
2	_____	_____	_____	_____	_____
3	_____	_____	_____	_____	_____
4	_____	_____	_____	_____	_____
5	_____	_____	_____	_____	_____
6	_____	_____	_____	_____	_____
7	_____	_____	_____	_____	_____
8	_____	_____	_____	_____	_____
9	_____	_____	_____	_____	_____
10	_____	_____	_____	_____	_____