



OKIE DOKIE CATTLE

PREGNANCY TEST SUBMISSION FORM

Name _____

I WANT MY RESULTS BY: (Circle One)

Address _____

PHONE

City, State Zip _____

FAX

Phone _____

E-MAIL

Fax _____ E-mail _____ OTHER _____

Number of Samples submitted _____ Payment enclosed _____

Tube #	Animal ID	Tube #	Animal ID	Tube #	Animal ID	Tube #	Animal ID	Tube #	Animal ID
1		11		21		31		41	
2		12		22		32		42	
3		13		23		33		43	
4		14		24		34		44	
5		15		25		35		45	
6		16		26		36		46	
7		17		27		37		47	
8		18		28		38		48	
9		19		29		39		49	
10		20		30		40		50	