



**Cattle Sample Submission Form for BioPRYN
Pregnancy and BVDV Testing**



931.243.2400
www.appbioscience.com
info@appbioscience.com

Billing Information:

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

Send Report by: (Indicate preferred method to receive report)

- Email: _____
- Phone: _____
- Mail: (sent to the address under Billing Information)

Samples:

Date Drawn: _____ Date Sent: _____
Number of Samples Submitted: _____

Optional Information:

Veterinarian's Name: _____
Client's Name (if submitted by Vet) _____
Herd ID _____

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

Breed of Animal:

Beef Breed: _____
Dairy Breed: _____

Breeding Method:

- Bull
- Artificial Insemination (AI)
- Embryo Transfer (ET)

Test Options and Cost:

BioPRYN: \$3.00 BVDV \$3.50
Payment Included \$: _____

Check or money order made out to:

Appalachian BioScience

Payment must be received prior to processing samples.

Volume Discounts available; call or email for information.

Tube #	Animal ID	Days Bred	BioPRYN-Pregnancy	BVDV	Total
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
Page 1 Subtotal (or Total):					

Please see our instructions for collecting and shipping samples. Please mail samples and remit payment to:

Appalachian BioScience 120 Industrial Park Lane, Celina, TN 38551

Tube #	Animal ID	Days Bred	BioPRYN-Pregnancy	BVDV	Total
18					
19					
20					
21					
22					
23					
24					
25					
26					
27					
28					
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61					
62					
Page 2 Subtotal:					
Total Pages 1 & 2:					

Tube #	Animal ID	Days Bred	BioPRYN-Pregnancy	BVDV	Total
63					
64					
65					
66					
67					
68					
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71					
72					
73					
74					
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107					
Page 3 Subtotal:					
Total Pages 1, 2, & 3:					