



GD SPECIMEN SUBMISSION FORM : FTA CARDS SWINE

Number of FTA cards	Authorisation	GD identification label	Submission number: GD use only
 GD use only	Date	GD use only	GD use only
	Initials		

Please complete relevant sections thoroughly .

Farmer / Veterinarian:		
Street address: _____		Customer no: <input style="width: 100px;" type="text"/>
Postal code + City: _____		
Other :		
Street address: _____		Customer no: <input style="width: 100px;" type="text"/>
Postal code + City: _____		
Reference on result and invoice: <input style="width: 400px;" type="text"/>		

Submitter is	Farmer	Veterinarian	Other	English results (Engelse uitslag)
Send result to	Farmer	Veterinarian	Other	
Send invoice to	Farmer	Veterinarian	Other	
			GD project nr. <input style="width: 50px;" type="text"/>	
Number of FTA cards	<input style="width: 50px;" type="text"/>			

Type	<input style="width: 80px;" type="text"/>
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Card ID.	SPOT	Identification	Card ID.	SPOT	Identification
	1			1	
	2			2	
	3			3	
	4			4	
	1			1	
	2			2	
	3			3	
	4			4	
	1			1	
	2			2	
	3			3	
	4			4	
	1			1	
	2			2	
	3			3	
	4			4	

Producer:	Treatment declaration
Name:	As producer of the FTA Card(s) I hereby declare that the card(s) that I submit with this form has/have been put through a microwave treatment at which it has/have been heated for twenty (20) seconds at 900 watt to inactivate any possible virus. When producers signature is missing on the submission form, GD is not allowed to receive the samples and has to destroy these upon arrival.
Signature:	
Date:	

