

Health Testing Submission Form

PRINT A COPY AND SUBMIT WITH YOUR SAMPLES:
Form can only be accepted with samples

Taconic Biosciences
1 Discovery Drive, Room 107
Rensselaer, NY 12144
Phone: 1-888-822-6642
Fax: 518-697-3910

New Customer?

Estimated Ship Date:

General Information Please send results to:

Institution

Principal Investigator

Email

Phone Number Ext

Fax Number

Address

City

State Zip Code

Country

All reports will be emailed. If hard copy is required, please check here:

C. Method of Payment:

Purchase Order Number (attach copy)

Credit Card? Enter the last 4 digits of your card

E. Total number of samples to be submitted

Billing Information

Same as General Information

Institution

Principal Investigator

Email

Phone Number Ext

Fax Number

Address

City

State Zip Code

Country

D. Special Instructions:

Please provide enough food and water for up to five days for live animal submissions.



Health Testing Submission Form

Please provide enough food and water for up to five days for live animal submissions.

Sample ID	Dilution	Solution	Species	Sample Type	Test Required Serology	Test Required Microbiology and PCR	Test Required Comprehensive Test Panels
						Total samples on this page	

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Additional Instructions:

Principal
Investigator



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