Ship specimens to: **Necropsy Loading Dock**
National Wildlife Health Center
U.S. Geological Survey
6006 Schroeder Road
Madison, WI 53711-6223
608-270-2400

IBDC Testing Submission Form
(Please fill in each column for each specimen submitted)

Submitter/Contact Person:					
Institution:					
Street Address:					
City:	**County:**	**State:**	**Zip Code:**	**Phone( )**	**Fax( )**
					Email:

Specimen ID	Species	Age	Sex	Captive Bred	Wild Caught	Origin	Sample Date	Comment
(Example) 850126	***Anthropoldes virqo* Demoiselle Crane**	**4 yrs.**	**F**			**Hatched at XYZ Zoo**	**05/25/00**	**(Example) Routine Screen**