



Kansas State Veterinary
DIAGNOSTIC LABORATORY

MULTIPLE ANIMAL SUBMISSION FORM

Kansas State Veterinary Diagnostic Laboratory
1800 Denison Avenue, Mosier D117, Manhattan, KS 66506
Phone: (866) 512-5650 Fax: (785) 532-4835
www.ksvdl.org

Laboratory Use Only

Case Coordinator



Accession Number

Panel

**Please download/save
and use Adobe Acrobat
to complete form.
Many web browsers
cannot fill form fields**

**NOTE: This is a continuation of the General Sample submission Form -
Please fill out the General Submission Form completely and legibly.**

Veterinarian: _____	Owner/Producer: _____
Clinic: _____	Business/Premise ID: _____

	Animal Name / Number/ ID	Species	Breed	Sex	Age	Collection Date
1				<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Neutered/Spayed		
2				<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Neutered/Spayed		
3				<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Neutered/Spayed		
4				<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Neutered/Spayed		
5				<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Neutered/Spayed		
6				<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Neutered/Spayed		
7				<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Neutered/Spayed		
8				<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Neutered/Spayed		
9				<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Neutered/Spayed		
10				<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Neutered/Spayed		
11				<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Neutered/Spayed		
12				<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Neutered/Spayed		
13				<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Neutered/Spayed		
14				<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Neutered/Spayed		
15				<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Neutered/Spayed		
16				<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Neutered/Spayed		
17				<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Neutered/Spayed		
18				<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Neutered/Spayed		
19				<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Neutered/Spayed		
20				<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Neutered/Spayed		

This submission form is a legal binding contract between KSVDL and the submitting entity. All specimens, animals, and/or biological materials submitted to the KSVDL as well as any test results, diagnoses, or other analyses resulting from these submissions will become the property of KSVDL. Specimens also may be used for teaching purposes. All fees incurred are the responsibility of the submitting entity. A 1.5% finance charge will be assessed on all charges over 30 days.