

# ParaSite Diagnostic Services

Factory 1, 3 Bray Street

HASTINGS VIC 3915

Ph: 03 5979 3101

Fx: 03 5979 4499

ABN: 84 506 278 331

Email: [parasite1@iinet.net.au](mailto:parasite1@iinet.net.au)



## Poultry Sample Submission Form

### SMALL FLOCK - SINGLE BIRD SUBMISSION - 1 screw cap bottle per kit

*Submit one of these forms with each group you want tested.*

Samples are not processed unless prepaid or there is an account

Shed / Group :	Age:	Type of bird:
Submitted by:		
Address:		
Date collected: _____ I have added several samples per bottle / There is one faecal sample in the bottle If there is no detail the lab will automatically run bulk counts		
Tests carried out: Coccidiosis assessment / Round worms		
<i>The lab prefers to return results to you by the quickest route possible.</i>		
<i>Please tell us which way is best for you. Email preferred.</i>		
<b>To help interpret your result, please provide some information on the samples you are submitting, the reason, and how the laboratory can identify each sample group. If marking each bottle with a number please use indelible ink pens.</b>		
Do you need more testing kits? :      Yes please / No thanks		
<b>Laboratory use only below this line</b>		
Date sample received:	ParaSite accession number:	

*Fill the bottle to no more than 75%. Screw on caps firmly. Place the bottles into the clip top plastic bag, and place it and this submission form into the mailing bag. Post in any post box. Send samples by Express Post if they are urgent, as the lab processes these samples first.*

Contact the lab if you have several pens or flocks – you may be better to order a LARGE kit

**Express Post Samples Are Priority Processed**

[www.parasite.com.au](http://www.parasite.com.au)

# ParaSite Diagnostic Services Credit Card Poultry

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**Credit card authorization form**  
**Send this in with your samples**  
**The price list can be found on [www.parasite.com.au](http://www.parasite.com.au)**

**Name:** \_\_\_\_\_

**Phone number:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Credit Card type:** VISA / MASTERCARD only

**NUMBER:** \_\_\_\_\_

**Expiry date:** \_\_\_\_ / \_\_\_\_

**Dollar Value: \$**

**Name on the card:** \_\_\_\_\_

**Amount authorised:** \_\_\_\_\_

**COMMENTS:**

**Credit card details are not kept**