

# IDENTIFICATION SHEET FOR MULTIPLE ANIMALS

*(To accompany WADDL Accession form, if needed)*

**Washington Animal Disease Diagnostic Laboratory**  
 College of Veterinary Medicine, Washington State University  
 Mailing address: \_\_\_\_\_ Shipping address: \_\_\_\_\_  
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 E-Mail: waddl@vetmed.wsu.edu  
 Web Site: <http://waddl.vetmed.wsu.edu>

Owner: \_\_\_\_\_

Veterinarian: \_\_\_\_\_

TEST(S) REQUESTED: \_\_\_\_\_

Tube	Animal # or Name	Tube	Animal # or Name	Tube	Animal # or Name	Tube	Animal # or Name
1	_____	26	_____	51	_____	76	_____
2	_____	27	_____	52	_____	77	_____
3	_____	28	_____	53	_____	78	_____
4	_____	29	_____	54	_____	79	_____
5	_____	30	_____	55	_____	80	_____
6	_____	31	_____	56	_____	81	_____
7	_____	32	_____	57	_____	82	_____
8	_____	33	_____	58	_____	83	_____
9	_____	34	_____	59	_____	84	_____
10	_____	35	_____	60	_____	85	_____
11	_____	36	_____	61	_____	86	_____
12	_____	37	_____	62	_____	87	_____
13	_____	38	_____	63	_____	88	_____
14	_____	39	_____	64	_____	89	_____
15	_____	40	_____	65	_____	90	_____
16	_____	41	_____	66	_____	91	_____
17	_____	42	_____	67	_____	92	_____
18	_____	43	_____	68	_____	93	_____
19	_____	44	_____	69	_____	94	_____
20	_____	45	_____	70	_____	95	_____
21	_____	46	_____	71	_____	96	_____
22	_____	47	_____	72	_____	97	_____
23	_____	48	_____	73	_____	98	_____
24	_____	49	_____	74	_____	99	_____
25	_____	50	_____	75	_____	100 *	_____

\* For over 100 samples, please copy this form and continue numbering.