

Sächsischer Landeskontrollverband e.V. • August-Bebel-Str. 6 • 09577 Niederwiesa • www.lkvsachsen.de • e-Mail: labor@rizu.de • Tel. 037206 / 87-167 • Fax. 037206 / 87-230

- E-Mail
- Fax

Customer No.*: _____

Adress*: _____

Place/State*: _____

Phone*/Fax: _____ / _____

E-Mail: _____

Crate Number: _____

fill out by the laboratory

order number: _____

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sample receipt:

date: _____

milk temperature: _____ °C

*mandatory fields to fill out

no.	sample identifier* (if no cow's milk, please note the type of milk, at missing marking the allocation take place according to current number))	date of sampling	note/preservation	fat (Gerber)	fat – cream (Roeder)	freezing point (cryoscope)	Clostridium spores	pH-value	quinolones (inhibitors)	inhibitors (microb. test)	Inhibitors dilution	Inhibitors differentiation	rapid tests		
													Charm MRLBLTET2A	Duplex BT	SNAP ST plus
1															
2															
3															
4															
5															
6															
7															
8															
9															
10															
11															
12															
13															
14															
15															

- I do **not** want an evaluation of the analysis results (conformity assessment). Please note that this leads to additional costs.
- I do **not** want to be assigned to a third-party laboratory. This leads to the fact that the offered investigations can not be carried out.

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signature