



**SUBMISSION FORM
Rabies Antibody Test**

Date of arrival DNo

Please use capital letters. Points marked with an asterisk (*) are mandatory information. The analysis certificate will be sent by secure e-mail if the e-mail address is indicated by submission form. Finnish private customers (not companies) must identify themselves electronically in the Suomi.fi service. Instructions will be sent via SMS. Private customers who do not have a Finnish personal identity code have to fill in their date of birth to the submission form. Electronic identification or the date of birth is needed before the test result and invoice can be delivered to the customer. Fill in a Business ID or VAT ID to the submission form if the invoice is sent to the company.

Name of veterinary surgeon/veterinary clinic*		Telephone*
Address*	Postcode*	Town/City*
E-mail		Business ID/VAT ID*
<input type="checkbox"/> Analysis certificate and invoice*		<input type="checkbox"/> Copy of analysis certificate*

Name of owner*		Telephone*
Address*	Postcode*	Town/City*
E-mail		Date of birth/Business ID/VAT ID*
<input type="checkbox"/> Analysis certificate and invoice*		<input type="checkbox"/> Copy of analysis certificate*

Date of sampling	Type of sample <input type="checkbox"/> serum <input type="checkbox"/> blood (May not contain anticoagulants)
Animal species/breed*	Name
Microchip number/tattoo number*	Date of birth
Rabies vaccinations	
Additional information	

Also analyses other than those requested by the customer can be made from the samples. These analyses are not invoiced from the customer. Finnish Food Authority holds the publication rights for these results. Results can be used in different types of reports and statistics as well as in Finnish and international scientific publications.

Date	Signature of veterinary surgeon*	Name of signatory*
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