

# SWANS Veterinary Services



## F.W.E.C SUBMISSION FORM

<b>NAME:</b>	<b>FAX # :</b>	
<b>PROPERTY:</b>		
<b>DATE SAMPLES COLLECTED:</b>		
<b>MOBS TO BE TESTED:</b>		
1)	6)	
2)	7)	
3)	8)	
4)	9)	
5)	10)	
<b>REASON FOR TESTING: (please indicate with a tick)</b>		
Pre Weaning ...	Pre 1 <sup>st</sup> Summer Drench ...	Pre 2 <sup>nd</sup> Summer Drench ...
Pre Lambing ...	Pre Marking ...	Suspect Barbers Pole ...
Sheep Dying ...	Poor Condition ...	Scouring ...
Monitor ...		
Other:		
<b>DRENCH HISTORY:</b>		
When Last Drenched:		
Drenched Onto:		
Drench Used:		
<b>COMMENTS:</b>		

NOTE: Please present 10 individual samples from each mob of sheep i.e. in egg cartons, plastic bags or bottles.