Public reporting burden for this collection of information is estimated to average .50 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of the collection of information, including suggestions for reducing this burden, to Department of Agriculture, Clearance Officer, OIRM, Room 404-W, Washington, DC 20250; and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, DC 20503.

This report is required by Regulation (9 CFR 113). Failure to report can result in no certification being made for authenticity of samples of product.

OMB NO. 0579-0013

U.S. DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

SHIPMENT AND RECEIPT OF BIOLOGICS SAMPLES

INSTRUCTIONS: Submit original and one copy with samples. (Leave carbons intact.)

1. DATE SUBMITTED

2. FIRM LICENSE NO.

3. NAME AND MAILING ADDRESS OF FIRM (Include Zip Code)

4. PURPOSE

☐ ROUTINE CONCURRENT SAMPLE ☐ MASTER SEED ☐ CELL LINE ☐ PRELICENSING SAMPLE

☐ RETENTION SAMPLE ☐ RESUBMISSION (Specify in remarks) ☐ OTHER (Specify in remarks)

5. HOW IS PRODUCT SHIPPED

☐ DRY ICE ☐ REFRIGERATED ☐ UNREFRIGERATED

OTHER (Specify)

PRODUCT IS SHIPPED VIA

PRODUCT NAME (No trade names) (Only one entry per line) 6.	**PRODUCT CODE** 7.	**SERIAL NO.** 8.	**SAMPLE CODE** (For Gov't Use Only) 9.	**SAMPLE CONTAINERS SUBMITTED**			**INDICATE BULK OR FINAL** 13.
				NO. 10.	**SIZE** 11.	**FIELD DOSE** 12.	

I certify that I am an authorized government sampler and the samples listed above were selected and are submitted in accordance with 9 CFR 113.3.

14. SIGNATURE OF AUTHORIZED GOVERNMENT SAMPLER

Telephone Number

15. DATE

16. REMARKS

ACKNOWLEDGEMENT OF RECEIPT OF SAMPLES

17. CONDITION AND REMARKS

18. RECEIVED BY (Signature)

19. DATE RECEIVED

APHIS FORM 2020
(JUL 90)